MISSOURI PART C INDICATOR 11:

STATE SYSTEMIC IMPROVEMENT PLAN (SSIP)

2013-14 through 2018-19

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Table of Contents

Overview of Missouri's Part C State Systemic Improvement Plan (SSIP)

Stakeholders: Each component in the Missouri Part C SSIP includes a description of key stakeholders and their role in developing Phase I of the SSIP. Throughout Phase I, the state primarily used three existing stakeholder groups that were already familiar with the Part C program: the State Interagency Coordinating Council (SICC); the Early Childhood Outcomes (ECO) work group; and the Missouri Department of Elementary and Secondary Education (the Department) early learning team.

        Internal Stakeholders: Persons involved in the Part C system are internal stakeholders. Missouri's Part C SSIP internal stakeholders include the following:

- State staff in the Department's Office of Special Education, Early Intervention section who are members of all three stakeholder groups
- Early intervention providers who are members of the SICC
- Parents of children with disabilities who are members of the SICC
- System Point of Entry (SPOE) directors and Service Coordinators who are members of the ECO work group

        External Stakeholders: Persons outside of the Part C system are external stakeholders. Missouri's Part C SSIP external stakeholders include the following:

- Staff in the Department's Office of Special Education, Part B/619 section who are members of the ECO work group and the Department's early learning team
- Staff in the Department's Office of Quality Schools, Early Learning section who are members of the ECO work group and the Department's early learning team
- Staff from multiple state agencies who are members of the SICC, including the Departments of Social Services, Health and Senior Services, Insurance and Mental Health
- Staff from Head Start state collaboration office who are members of the SICC
- Personnel preparation staff from the Center for Excellence, Education, Research and Service in Developmental Disabilities who are members of the SICC
- Staff from local school districts who are members of the ECO work group

Data Analysis: This component in the Missouri Part C SSIP describes a broad and subsequent focused data analysis. After a broad data analysis, the area with the largest inconsistencies in data trends that warranted further inquiry was Indicator 3: Child Outcomes. Thus, the state determined a more in-depth analysis in the area of Child Outcomes was necessary in order to determine the factors contributing to inconsistent data for this indicator.

        Root Cause: Based on national technical assistance and input from stakeholders, the state determined the collection and determination of child outcomes was: not consistent within or between regions in the state; not frequent enough to accurately report progress between entry and exit; and not meaningful to the IFSP team and service delivery. These three issues were determined to be the root cause for data quality issues with child outcomes. To address the root cause, the state initiated a Part C ECO pilot project to increase the use of consistent, frequent and meaningful data for child outcomes.

Disaggregated Data: Based on an analysis of multiple variables (including gender, race/ethnicity, geographic region, socioeconomic status, eligibility criteria and length of time in the Part C program), the state determined more than half the children are: at-or-below poverty; participating in Part C due to a developmental delay; and receiving services in natural environment settings for approximately 18 months. Given the state's narrow criteria for half-age delay in development and children with disabilities are briefly served by Part C, the challenge in measuring Missouri child outcomes is how to make the biggest impact on a child with disabilities and their family in a short period of time.

Infrastructure Analysis: This component in the Missouri Part C SSIP describes the state's systems for governance, finance, quality standards, professional development, data, technical assistance and accountability/monitoring activities.

Strengths: The state contracts with regional System Point of Entry (SPOE) agencies that employ all Service Coordinators, which is arguably the strongest aspect of infrastructure for Missouri's Part C program. Complimentary to the SPOE contract, the state's ability to employ five regional staff who monitor the contract and provide training or technical assistance to the region enhances the strength of the regional system.

Challenges: The independent provider system allows for increased flexibility and independence on the provider's part which has increased the coverage area for services throughout the state, but it is challenging to coordinate provider activities and communications. While transition to a team model has improved the communications between and among providers and Service Coordinators, there is still room for improvement in the coordination of team activities and the recognition of best practices for home visits and team meetings.

Areas for Improvement: The state identified teams as the component of infrastructure that can be leveraged to build the capacity to implement the Missouri Part C SSIP. The state determined the performance of teams, specifically the activities conducted in home visits and the discussions in team meetings, are critical for improving child outcomes. By increasing support in the practices of professionals on the team, the state will improve the regional infrastructure which will ultimately-improve outcomes for all children participating in Missouri Part C.

State-Identified Measurable Result (SIMR): This component in the Missouri Part C SSIP describes the rationale for selecting a measurable result. Missouri identified the following statement of measureable results for children with disabilities:

By FFY 2018, Missouri Part C intends to increase by 10 percent the number of children with disabilities who improve their social-emotional skills by the time they exit Part C, for children entering Part C below age expectation in social-emotional skills.

Based on this statement of measureable results for children with disabilities, Missouri identified the following baseline and target data:

Baseline Data

FFY	2013
Data	**69.1%**

FFY2014 – FFY2018 Target Data

FFY	2014	2015	2016	2017	2018
Target	**71.1%**	**73.1%**	**75.1%**	**77.1%**	**79.1%**

Improvement Strategies: This component in the Missouri Part C SSIP describes how the state's data and infrastructure analyses align with two key initiatives: the Early Childhood Outcomes (ECO) pilot project and Early Intervention Teams (EIT). Missouri selected four levels of coherent improvement strategies for the SSIP. These four levels of improvement strategies will lead to accurately identifying, measuring and evaluating child outcomes.

Theory of Action: This component in the Missouri Part C SSIP describes how improvement strategies will lead to improvement in child outcomes, including a graphic illustration. Missouri identified the following theory of action:

If the state implements Level One improvement strategies by providing the mechanisms (i.e., provider training and paid time for professional development during EIT meetings) and materials (i.e., evidence-based practices, use of videos and child development information) for EIT members to have meaningful discussions about evidence-based practices that improve social-emotional skills in children with disabilities . . . then EIT members will recognize typical and atypical social-emotional skills and strategize how to improve the outcomes of children participating in Part C.

And if the SPOEs implement Level Two improvement strategies by conducting an annual needs assessment, which includes observations of EIT meetings, IFSP meetings and home visits, to assess current practice . . . then the SPOEs will know if EIT members are using evidence-based practices and, if needed, provide targeted training and technical assistance.

And if the state implements Level Three improvement activities by compiling multiple benchmark data (i.e., reports, surveys and observations) to evaluate regional performance . . . then the state will determine if the current level of training and technical assistance is working or if a more intensive plan is necessary to improve child outcomes.

And if the state implements Level Four improvement activities and all EIT members discuss child progress in social-emotional skills during IFSP meetings and use the decision tree to accurately rate child outcomes in social-emotional skills . . . then parents will engage in IFSP meeting discussions to recognize progress in their child's social-emotional development. And if all EIT members use evidence-based practices and monitor the child's progress during home visits . . . then parents participate in home visits to learn strategies to improve their child's development. And if parents use these strategies between visits with providers . . . then the intended consequence is an increased percent of children with positive social-emotional outcomes.

1. Component 1: Data Analysis

1.1. Existing Data Types and Sources.

Prior to conducting a data analysis for the Missouri Part C state systemic improvement plan (SSIP), state staff first identified the various data types and data sources readily available for analysis. With assistance from the North Central Regional Resource Center (NCRRC), state staff conducted an extensive analysis of all Part C fiscal year activities and related data collection and reporting. State staff compiled a list of all required activities necessary to meet federal and state regulations and all activities necessary for general supervision or program improvement. Each activity on the list was carefully considered for its purpose, impact and available data or measurement. Any necessary activities that were missing from the list were added and any activities that did not create efficiency and effectiveness for the Part C program were eliminated. State staff developed a chart of the data sources and the type of data collected in each (see *Figure 1: Missouri Part C Data Sources*).

The primary data source for information about Missouri's Part C program is WebSPOE, a secure, web-based child data system that contains all elements of a child's record, including referral, evaluation, eligibility and Individualized Family Service Plan (IFSP) information. The system is compliance driven and ensures compliance with regulations as well as best practice. Service Coordinators utilize the system to record child demographic and IFSP information and enter authorizations for Part C providers to deliver early intervention services. Providers utilize the system to review the child's record, enter progress notes and submit claims for delivered early intervention services. Therefore, the system provides primarily quantitative data (i.e., child count, amounts of services, timelines, etc.) but also provides some qualitative data (i.e., description of IFSP outcomes, progress notes, meeting activities, etc.). Each month state staff use key data elements from WebSPOE (e.g., child count, referral numbers, referral sources, exit reasons, etc.) to compile a monthly SPOE data report that is made available to the public. As needed, state staff may request reports to be derived from the system and analyzed for specified purposes, including monitoring of compliance or program performance.

Another data source for information about Missouri's Part C program is surveys. At least once a year, state staff or their designee conduct interviews and/or disseminate surveys to Service Coordinators, providers, parents or other members of the early intervention community in order to gain perceptions, reflections and expectations about the Part C program. Survey procedures provide multiple perspectives from a statewide and regional view on particular topics related to Part C. State staff analyze survey results to determine trends in responses. The state uses trends in survey responses to inform training or problem-solve issues with statewide or regional technical assistance.

The NCRRC provided information to the state on how to triangulate key data to ensure a balance of information. Through an analysis of Part C fiscal year activities, state staff found that key data related to observations of providers and Service Coordinator practices were missing from the state's existing data. Observation data provide for direct observation of provider and Service Coordinator skills that can help identify discrepancies in other data sources. For example, if in a particular area of the state there is a high percent of parents who are satisfied with their services but children are not meeting IFSP outcomes, the skills and practices of

providers and Service Coordinators can inform the type of training or technical assistance to deliver in that region.

This extensive analysis of Part C fiscal year activities resulted in a more focused and efficient plan for Missouri's early intervention program. A key take-away from this activity was the need to collect observation data. In recent months, the state has been working to create a plan to conduct observations with providers and Service Coordinators. The plan will be completed in 2014-15 and data will begin to be collected in 2015-16. Therefore, for the purpose of the initial data analysis for Phase I of the SSIP, observation data were not available for review.

1.2. Broad Data Analysis.
To conduct a broad data analysis for Missouri's Part C SSIP, state staff utilized the State Performance Plan/Annual Performance Report (SPP/APR) as the framework since data for multiple years were readily available, which made it possible to conduct analysis and identify trends in data patterns. Other sources included in the broad data analysis include 618 data as reported to the U.S. Department of Education, Office of Special Education (OSEP) and state data derived from the WebSPOE system.

To begin the broad data analysis, a summary chart with baseline, targets and performance data for Missouri Part C SPP/APR was compiled for each year that data were reported to OSEP (see *Figure 2: Missouri Annual Performance Report Summary – Part C*). The NCRRC provided information to the state on developing a list of critical questions to ask when analyzing each SPP/APR indicator, including questions related to who, what, when, why and how. SPP/APR data were divided into two sets: results indicators and compliance indicators.

A. Analysis of Results Indicators - The following is a summary of the extensive analysis of results data in the SPP/APR:

Indicator 2: Services in Natural Environments – A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for this indicator, including a notation for an increase or decrease in performance from year to year. Trends in data for this indicator suggest high performance (i.e., 95 percent or above) and the state has consistently met targets. Although the preliminary review suggested a consistently high performance and most services delivered in natural environments, the data do not tell the whole story about services. It cannot be assumed that just because children receive most services in a natural environment that they will make progress. State staff wanted to know more about these services in natural settings and utilized this opportunity to drill-down into this indicator. Additional critical questions about the results for this indicator were asked, including *who delivers services to families?* and *how are home visits conducted?*

Further analysis of data on services delivered in the natural environment was conducted using state data from the WebSPOE system. Results found approximately 75 percent of all services delivered to children and families participating in Part C were delivered by five disciplines (ranked order): Speech/Language Pathology; Special Instruction; Physical Therapy; Occupational Therapy and Applied Behavior Analysis. When reviewing regional data, the rank order of these service types was generally the same across regions.

While the data answer the question about who provides which services to families in Part C, the data do not explain how the service is delivered. The state has identified key competencies for quality services in the natural environment and activities expected in a home visit, using national literature and research on early intervention services. State staff trained providers on quality, support-based home visits and evidence-based practices and collected qualitative feedback on provider practice via focus groups and provider surveys. While the state can compile current data on who delivered services and where, the critical question of *how are home visits conducted?* cannot be answered until additional data (i.e., observations of meetings and home visits) are collected in future years.

Indicator 3: Child Outcomes – A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for this indicator, including a notation for an increase or decrease in performance from year to year. Trends in data for this indicator suggest inconsistent performance within summary statements and between summary statements (i.e., summary statement one* increased from 60 percent to 80 percent and summary statement two** decreased from upper 40 percent to 30 percent) and the state has not met targets for several years. Additional critical questions about the results for this indicator were asked, including *why are the summary statements fluctuating*? and *what information is used to determine ratings?* and *are there regional differences in data?*
   Summary statement one: Of the children who entered the program below age expectation for the Outcome, the percent that substantially increased their rate of growth in the Outcome by the time they exited.
   **Summary statement two: Percent of children who were functioning within age expectations in the Outcome by the time they exited.*

Several analyses of data on child outcomes were conducted. First, the state used two data sources (child outcome data spreadsheets and Service Coordinator surveys) to answer the critical questions. By drilling down into the outcome data, it was determined approximately 75 percent of children's entry ratings were at or near age-appropriate skills and almost 50 percent of children exiting Missouri's Part C program were at age-appropriate skills. These data were inconsistent with the state's eligibility criteria for a half-age delay in development (i.e., 50 percent delay in at least one developmental domain). A review of regional data did not indicate a pattern in ratings.

At the same time child outcome data were analyzed, a survey was sent to Service Coordinators to identify the procedures used to collect and rate outcomes. Survey results revealed parent interview was the primary method for the Service Coordinator to collect outcome data. Based on the result of this data analysis for child outcomes, the state reiterated the procedures for collecting and rating child outcomes through training and technical assistance to all Service Coordinators.

Indicator 4: Family Outcomes – A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for this indicator, including a notation for an increase or decrease in performance from year to year. Trends in data for this indicator suggest high performance (i.e., 95 percent or above) and the state has consistently met targets. It was noted that the response rate over the years has remained in mid-20 percent range; only one year did the response rate rise

above 30 percent. Although the preliminary review suggested a consistently high performance, state staff wanted to know more about the family's responses to survey items and utilized this opportunity to drill-down into this indicator. Additional critical questions about the results for this indicator were asked, including *what is the purpose and use of each survey item?* and *how are the parent's responses aligned with the child's outcomes?*

Further review of the family survey was conducted. The first suggestion from stakeholders was to look at the length of the survey. The feedback was the current survey with 31 questions was fairly lengthy for families to complete, which may be contributing to the low response rate. However, consideration for changing the family survey was greatly debated and discussed with stakeholders because changing the survey items would not allow the state to map historical data results to future results. Therefore, questions in the survey related to this indicator were kept intact to provide consistency in data collection and reporting of this indicator. However, all other questions were carefully reviewed and considered for purpose and use by the Part C program. Questions that did not provide a clear purpose or use in the Part C program were eliminated. Any content area deemed necessary but missing in the existing survey was identified and additional questions were added.

With assistance from the Early Childhood Technical Assistance (ECTA) center, state staff identified questions from two national surveys for possible inclusion in Missouri's family survey: (1) the Family Outcomes Survey – Revised Version (FOS-R) and (2) the National Center for Special Education Accountability Monitoring (NCSEAM) Family Survey – Early Intervention. The result of this data analysis activity was a shortened, more focused family survey that directly mapped to activities in Missouri's Part C program and aligned to items on the national surveys in order to compare future responses. This survey analysis also identified a need for surveying families shortly after their child exits the Part C program in order to gain the perspective of families who are no longer in Part C. Therefore, a second survey was created with questions related to the child's progress, the family's experience and transition from Part C. Again, all questions were directly mapped to program activities and/or aligned with items from the national surveys.

In future years, the state will be able to collect family survey responses for parents with children actively participating in Part C and also from parents whose child recently exited Part C. However, the surveys are anonymous, meaning the state does not code the surveys with child or parent personally identifiable information. While the state can compile statewide and even regional data on experiences of families participating in Part C, and in future years, families who recently exited Part C, the critical question of *how are the parent's responses aligned with the child's outcomes?* cannot be answered unless one or both of the surveys are child-specific and the state can correlate a high, positive parent response to positive child outcomes.

Indicator 5: Child Find Birth to One and Indicator 6: Child Find Birth to Three – An analysis of child find data for Indicator 5: Child Find Birth to One was conducted simultaneously with Indicator 6: Child Find Birth to Three. A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for both indicators, including a notation for an increase or decrease in performance from year to year. It was noted for several years early in the SPP/APR data, Missouri Part C was challenged in meeting the child find targets. However, in recent years,

trends in data for both indicators suggest a consistent increase in performance (i.e., in the past five years, an increase from 0.75 percent of the population to 1.01 percent of the population for birth to one; and 1.55 percent of the population to 2.23 percent of the population for birth to three) and the state has consistently met targets for both indicators in recent years. Of note is the Part C birth to three population increased several percentages in years when the Missouri birth to three population actually decreased.

In recent years there have been slight regional differences in the percent of children served. In the two urban areas of the state, the percent of children served ranged from 2 to 2.4 and in two of the more rural areas of the state, the percent of children served ranged from 2 to 2.5. In addition to SPP/APR data for indicator 5 and 6, state staff reviewed the cumulative count of children served in Part C over the past five years, which increased from 7,890 in 2008 to 11,613 in 2014. The increase in child count was more striking using the cumulative count, which provided a more accurate picture of the impact Part C is making in Missouri.

Overall, all regions have improved performance on this indicator in the past five years. Program improvements linked to the overall increase in performance included a more systemic child find approach in the regions due to the requirements to have a regional interagency coordinating council that assists with local child find activities and public awareness. Additionally, continuity in regional staff working in Missouri's Part C program was also noted as a reason for improved public awareness and child find.

Although the preliminary review suggested recent high performance, state staff wanted to know more about child find and utilized this opportunity to drill-down into these indicators. Additional critical questions about the results for these indicators were asked, including *who refers children to Part C?* and *how many children are expected to be served by Part C?*

Before conducting a further analysis of child find data, state staff disaggregated data collected from the WebSPOE system to establish the demographics of families and children participating in Part C. Data on native language revealed only 2.5 percent of families in Part C required the use of a translator or interpreter. State staff also reviewed financial data and found 60 percent of families are participating in Medicaid, an indication that many children in the Part C program are at-or-near the poverty level.

State staff also reviewed 618 race/ethnicity data that indicated most children participating in Missouri Part C are white (not Hispanic) and black (not Hispanic) (72 percent and 16 percent, respectively). This number is comparable to Missouri's birth to three population (74 percent and 16 percent, respectively). The 618 data indicated slightly more than half the children in Missouri's Part C program are male (60 percent). This number is not comparable to Missouri's birth to age three population (49 percent male, 51 percent female).

Given that Missouri's eligibility criteria for Part C is fairly narrow, as depicted in the state's criteria to qualify with a developmental delay is a half-age delay (i.e., 50 percent delay) in at least one developmental domain of adaptive, cognition, communication, physical and social-emotional, the state included a review of eligibility reasons in the analysis for SPP/APR indicators related to child find. Data collected from the WebSPOE system indicated 54 percent

of all children participating in Part C qualified under developmental delay, 30 percent under diagnosed conditions and 16 percent under newborn condition. In a further review of data trends in eligibility for the past five years, this number has been consistent across the state with no outliers in the data; however, two regions indicated slightly higher percentages for children with developmental delays. To examine the eligibility reasons closer, the state factored out newborn conditions and found communication was the developmental domain that appeared most often in the data, and Down syndrome was the diagnosed condition that appeared most often.

Finally, state staff reviewed the 618 exit data in order to establish the primary reasons children leave Part C. State staff first looked at all children exiting and found: 58 percent transitioned to Part B; 17 percent were ineligible for Part B and 25 percent left Part C for various other reasons (e.g., moved out of state, withdrew, unable to locate, deceased, etc.). Next state staff analyzed the exit reasons for just the children who left Part C at age three. These percentages looked different as 70 percent transitioned to Part B, 21 percent were ineligible for Part B and only 9 percent left Part C for other reasons. The data seemed reasonable given more children exiting Part C before age three had various reasons compared to children exiting Part C at age three. However, the results led state staff to look into the length of time children are in Part C. Data collected from the WebSPOE system indicated for children who exit Part C at age three, the average length of time in the program increased from an average of 15 months in 2012 to 18 months in 2014.

Further analysis of child find data for these SPP/APR indicators was conducted using state data from the WebSPOE system. Results found significant increases in the statewide number of referrals in recent years with consistent improvement in all regions. However, a few regional discrepancies were identified in the primary referral source types, including in some parts of the state there were decreased referrals from medical professionals such as hospitals, physicians or other health care professionals and from agencies making referrals under the Child Abuse Prevention and Treatment Act (CAPTA).

Given the increased number of children served in Part C, the state contracted with an entity to conduct an updated eligibility forecasting study to determine the projected number of children to be served in Part C in Missouri. An original projection was established in 2007 that indicated between 1.65 and 1.85 percent of the birth to three population is expected to be eligible for Missouri Part C. This projection was updated in 2012 to indicate between 2.35 and 2.45 percent of the birth to three population is expected to be eligible for Missouri Part C. The forecasting study provided confirmation to the increased number of children eligible for Part C. However, follow-up data analysis was necessary because of the distinction between children referred and children served under an IFSP. Since Part C is a voluntary program, families can choose to withdraw from the program before eligibility is determined. After a further review of regional data for the reasons why families leave before an initial IFSP is completed, a few regional discrepancies were identified, including an increased number of families withdrawing or unable to locate in some parts of the state.

B. Analysis of Compliance Indicators - In addition to an analysis of results data from the SPP/APR, the state considered compliance data and its impact, if any, on the performance of the program. The following is a summary of the analysis of compliance data in the SPP/APR:

Indicator 1: Timely Services – A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for this indicator, including a notation of any increase or decrease from year to year. Trends in data for this indicator suggest a consistently low performance in recent years (i.e., upper 80 percent or lower 90 percent in the past five years) and the state has not met targets for several years. Further analysis of the data revealed only slight regional differences in rural areas of the state where there are fewer providers in Part C. The critical question of *why is the performance low on this indicator?* required further inquiry into the initiation of services in Part C.

Further analysis was conducted using interviews of Service Coordinators representing a statewide sample as part of compliance monitoring procedures. Results from the interviews revealed although the providers are ultimately responsible for the key activities involved in this indicator (i.e., delivering the first service to the family within 30 days from parental consent), it is the Service Coordinators who are trained and monitored for compliance on this indicator. Therefore, a discrepancy was found between the person responsible for the action and the persons trained and monitored on the action.

Indicator 7: 45-day Timeline – A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for this indicator, including a notation of any increase or decrease from year to year. Trends in data for this indicator suggest a consistently high performance in recent years (i.e., 95 percent or above) in all regions and the state has met targets in most of the recent years. Although the data review suggested a consistently high performance in meeting the 45-day timeline, state staff wanted to know more about the training and monitoring of this indicator. Further analysis was conducted using interviews of Service Coordinators representing a statewide sample as part of compliance monitoring procedures. Results from the interviews revealed Service Coordinators are ultimately responsible for the key activities involved in this indicator (i.e., complete the initial IFSP within 45 days from the date of referral to Part C) and the Service Coordinators are also trained and monitored for compliance on this indicator. Therefore, there were no discrepancies found between who conducts the action and who is trained and monitored on the action.

Indicator 8: Early Childhood Transition from Part C– A review of data results from SPP/APR reporting for FFY 2005 – 2012 was conducted for these indicators, including a notation of any increase or decrease from year to year. Trends in data suggest a somewhat high performance in recent years (i.e., 95 percent or above with the exception of the state fiscal year 2012-13 for 8A which was lower due to a change in federal requirements and the state's misinterpretation of these requirements) in all regions and the state has met targets in most of the recent years. However, state staff wanted to know more about the training and monitoring of this indicator. Further analysis was conducted using interviews of Service Coordinators representing a statewide sample as part of compliance monitoring procedures. Results from the interviews revealed Service Coordinators are ultimately responsible for the key activities involved in this indicator (i.e., develop an IFSP with transition steps and services within timelines, timely notification to the Local Educational Agency and conduct a timely transition conference with family approval) and the Service Coordinators are also trained and monitored for compliance on

this indicator. Therefore, there were no discrepancies found between who conducts the action and who is trained and monitored on the action.

  C. Summary of Broad Data Analysis: Strengths and Weaknesses of Missouri Part C Program - After completing a broad data analysis, it was determined the strengths and weaknesses of the Missouri Part C program to be: (1) recent data from the SPP/APR results indicators have positive trends with consistent improvement except for one: Indicator 3 Child Outcomes, which has shown inconsistent trends in data; (2) in general, recent data from the SPP/APR compliance indicators have positive trends with consistent improvement except for one: Indicator 1 Timely Services, which has shown slightly lower performance throughout the SPP/APR reporting period; and (3) most children participating in Part C who exit at age three continue to need special education services as indicated by their continued eligibility for, and transition to, Part B early childhood special education.

  The state considered all existing available data in the broad data analysis, including SPP/APR result and compliance data and 618 data. Additionally, the state included related data collected from the WebSPOE system and compliance monitoring procedures in the broad data analysis. After an extensive data analysis, the area with the largest inconsistencies in data trends and fewest existing explanations that warranted further inquiry was Indicator 3: Child Outcomes. Thus the state determined a more in-depth analysis in the area of Child Outcomes was necessary in order to determine the factors contributing to inconsistent data for this indicator.

1.3. Focused Data Analysis.
  In Missouri, Indicator 3: Child Outcomes is commonly referred to as Early Childhood Outcomes (ECO). Prior to conducting a focused data analysis of child outcomes, state staff reviewed the existing procedures and practices used for Part C ECO.

  A. History of ECO in Missouri –To start the process of gathering data for ECO in 2005, Missouri convened a stakeholder group with representatives from both the Part C and Part B programs, with organizational help from the National Early Childhood Technical Assistance Center (NECTAC). This stakeholder group met with state staff to develop a preliminary process for determining ECO ratings, facilitated by staff from NECTAC. Stakeholders represented all regions of the state, including urban, suburban and rural communities.

  In 2006, three models were piloted in a number of school districts and System Point of Entry (SPOE) regions across the state. Afterwards, district and SPOE staff met to discuss the pilot and to give recommendations for full implementation of ECO. Discussion and decisions for statewide implementation included the following:

- *Instrument.* Feedback from individuals administering the models indicated no one instrument collected all information for ECO. Often there was a rich description about the child's functioning that already existed from evaluations to determine eligibility, so the need for additional testing with a specific instrument would have led to over-testing young children with disabilities. Therefore, instead of identifying a specific instrument for statewide use, the stakeholder group determined that information for all three ECO indicators could be derived from multiple sources rather than a single assessment instrument. No approved list of instruments was compiled.

- *Summary sheet.* Feedback from stakeholders indicated a common form should be used for Parts C and B in order to record the multiple sources of information. The national model for the Child Outcomes Summary Form (COSF) was modified to create the Missouri Outcomes Summary Sheet (MOSS), which was designed to synthesize information from multiple sources into a comprehensive summary. The MOSS was used to provide standard documentation statewide for reporting to the state.

- *Ratings.* The stakeholder group discussed various rating scales and recommended a rating between 1 and 5 for each of the three outcome indicators, with 1 meaning *Not Yet* and 5 meaning *Completely* or comparable to same-age skills. A rating of a 5 roughly translated to a 0 – 10 percent delay. The use of a 5-point rating scale was a slight variation from the national model of ratings between 1 and 7.

- *Entry and exit.* All children with the potential of being in the program for six months or more received an entry rating and children received an exit rating if the child participated at least six months; no sampling was used. Midpoint ratings were not required. Entry and exit scores were recorded on the MOSS within 30 days of eligibility determination and exit from the program, respectively.

- *Progress categories.* The outcome status (i.e., summary statement) for each child was determined by comparing the entry and exit ratings. This comparison results in the rating being placed in one of five categories for the percent of children who: (a) did not improve functioning; (b) improved functioning but not sufficiently to move nearer to functioning comparable to same-aged peers; (c) improved functioning to a level nearer to same-aged peers but did not reach it; (d) improved functioning to a level comparable to same-aged peers; and (e) maintained functioning at a level comparable to same-aged peers. An entry score at 1, 3, 4 or 5 and exit at 1 would be placed in *category a* and an entry score at 5 and exit at 5 would be placed in *category e.* All other combinations of entry and exit would fall in *category b, c,* or *d,* depending on entry and exit scores.

B. Initial ECO Data – An initial review of the 2008-09 ECO data, the first full year progress data were available, showed unexpected Part C entry and exit scores. For entry scores, approximately 75 percent of all children entering Part C were rated as 3, 4 and 5, or functioning at some level of age appropriate skills in each of the three outcome areas. For exit, approximately 50 percent or half of all children exiting Part C were rated as 5 or completely functioning at age expectations. Since we know most children exiting Part C continue to qualify for special education services under Part B, the data were inconsistent with the state's eligibility criteria and required further inquiry into the issue. A review of regional data indicated several regions had high numbers of 5-5 (entry rating was a 5 and exit rating was a 5), but all regions overall had higher entry and exit ratings than expected.

To help understand the data, state staff sent a survey to all SPOEs asking about the procedures used to collect and determine ECO ratings. SPOEs responded that parent report was the primary source of information for all entry and exit ratings. To assist with reviewing all the ECO procedures and information thus far, the state reconvened the stakeholder group and discussed the status of ECO. The stakeholder group recommended similar procedures in that no

one instrument was required but slight revision so that each rating has three sources of information: parent input; professional observation and assessment results. Additionally, the Part C exit rating should align with the Part B entry rating, requiring district and SPOE staff to collaborate on the ratings. This activity generated the need to conduct a statewide training to reiterate the ECO procedures, including face-to-face trainings, recorded presentations and materials posted online.

The state reviewed follow-up outcome data in subsequent years of 2010 and 2011. While there was a steady decline in the entry and exit ratings with a 5-5, the percent of Part C exit ratings aligning with Part B entry ratings was similar. When SPOEs were asked again of the procedures used to collect and determine ECO ratings, the response was similar to the initial survey. Results from the follow-up reviews showed issues similar to the initial data review. The slight revisions to procedures and multiple rounds of training were not changing the data, an indication that the problem may be the procedures.

After collecting regional- and state-level information, state staff turned to national resources to determine the extent of the problem with the state's ECO data. The Early Childhood Technical Assistance (ECTA) center provided information about: the child outcome procedures utilized across states; data quality issues based on data trends; and expected patterns in progress categories.

1. Data Quality Issues **-** For procedures, information from ECTA indicates 75 percent of all states and territories use the national COSF with a 7-point scale; however, Missouri uses a modified tool with a 5-point scale. In addition, there is variability in eligibility criteria across states. Missouri is only one of four states with the narrowest eligibility criteria. Therefore, comparing Missouri's data to national data requires caution in interpretations because the rating scales and populations served do not align.

For data trends, information from ECTA indicated some variation in data trends from year to year is expected; however, large or inconsistent changes may be an indication of data quality issues unless it is a positive change that can be linked to programmatic changes. When plotting the summary statement data for Missouri Part C (see *Figure 3: Trends in ECO Summary Statements – Missouri Part C*), trends indicate a steady increase in summary statement one and steady decline in summary statement two, depicted by an increasing < data pattern in the statewide data. According to resources from ECTA, Missouri's trends indicate questionable data that requires further explanation. State staff drilled down into regional data in an attempt to explain the changes; however, with the exception of one region with a flat profile, the regional trends also indicated an increasing < data pattern. Further analysis of the three outcome areas in each summary statement revealed summary statement one consistently had slightly lower performance in positive social emotional skills when compared to the other outcome areas, and summary statement two consistently had slightly lower performance in appropriate behaviors when compared to the other outcome areas (see *Figure 3: Trends in ECO Summary Statements – Missouri Part C*).

For progress categories, information from ECTA suggested states utilize the rule in which progress *category a* should have less than 10 percent of the state's children and progress

category e should have greater than five percent but less than 65 percent of the state's children. Trends in Missouri's data were within the expected patterns for both progress categories.

2. *Root Causes for Data Quality Issues* - Based on national technical assistance and input from SPOEs, the state determined the collection and determination of ECO was: not consistent within or between SPOEs; not frequent enough to accurately report progress between entry and exit; and not meaningful to the IFSP team and service delivery. These three issues were determined to be the root cause for data quality issues with child outcomes. At this point the state began to consider a new ECO pilot project that would allow an in-depth analysis of the procedures used to collect and rate child outcomes in Part C.

C. Part C ECO Pilot Project – To begin to remedy the data quality issues, state staff explored various options for measuring child outcomes. Each existing procedure used for ECO was reviewed with stakeholder groups, including the collection of information and the rating scale. Feedback from stakeholders indicated the same concerns that no single instrument can collect all information for ECO and over-testing young children with disabilities should be avoided. Instead of identifying a specific instrument for statewide use, the recommendation was for more frequent ratings that coincide with IFSP meetings held every six months. Since young children grow and develop quickly in the first few years of life, including a discussion about ECO at each required IFSP meeting enables parents, providers and Service Coordinators to engage in a meaningful conversation about the child's progress, which could also lead to changes in service levels in the child's IFSP. To help guide the IFSP meeting discussions, a modification to the decision tree developed by the national technical assistance center was made for Missouri Part C. The decision tree was required to be used in the pilot project.

Feedback from stakeholders also included the consideration for keeping the 5-point rating scale as is, because it is utilized statewide in both Parts C and B programs. Unless necessary, changing the rating scale for the pilot project would not allow the state to continue to track data trends and would create different rating scales for Part C versus Part B. Therefore, the current rating scale was maintained for the Part C ECO pilot project.

Given that the initial ECO data showed little variance in regional ECO data, the state selected regions for the pilot based on a convenience sample. The regions closest in geography to state staff responsible for the initial implementation of the pilot project were identified in order for training and technical assistance to be closely monitored by state staff. Two regions were identified for initial installation of the pilot project, but only half of the Service Coordinators in each region were included in the first cohort, which allowed for a comparison within and between regions. Cohort one received initial training prior to implementing the pilot as well as monthly follow-ups.

An initial review of quantitative data for children in the pilot project showed entry ratings were significantly lower than the numbers presented in statewide data. Most children entering the pilot were near a rating of a 2 or emerging skills, as compared to the initial data review that found most children were 3, 4 or 5 or near age appropriate skills in each of the three outcome areas (see *Figure 4: Preliminary Part C Pilot Data*). Further analysis of the entry ratings found a

high level of consistency in the numbers within a region and between regions, indicating the revised procedures were implemented in a similar manner in both areas of the state.

The state also collected qualitative data through feedback from Service Coordinators in the pilot project. Feedback indicated the combination of IFSP team meeting discussions and the consistent use of a decision tree made the ECO rating more meaningful and ultimately a more accurate representation of the child's present level of functioning. Preliminary data from this pilot project indicated entry ratings were lower, yet both regions had similar ratings (see *Figure 4: Preliminary Part C Pilot Data*) when compared to pre-pilot ratings. When compared to pre-pilot scores, the state found one pilot region was more conservative in entry ratings prior to the pilot with an average entry rating of 2.8 versus an average entry rating of 3.8 in the other region. Upon further discussions with the regions, it was determined this pre-pilot difference was due to Service Coordinator experiences and training with the original ECO procedures. The most important aspect of the initial implementation of the pilot was, regardless of Service Coordinators prior experience or pre-pilot scores, the frequent collection of ECO using a decision tree during IFSP meetings resulted in consistent ratings within and between regions.

Feedback from Service Coordinators in the pilot project indicated the most challenging part of the pilot project was discussing age-appropriate skills for children whose skills had regressed since the last meeting or children who were medically fragile or terminally ill. Several made comments that it is human nature to want to highlight the positive, which was contributing to the inflated, higher ratings prior to the pilot project. Based on the quantitative and qualitative data collected from cohort one, the state began a second cohort exactly one year later. Similar materials were used to train cohort two prior to implementation and, once again, monthly follow-up training and technical assistance was provided to Service Coordinators in cohort two. At this time, the state has confidence in stating the data quality issues identified in Indicator 3: Child Outcomes were due to inconsistent and infrequent implementation of procedures for the collection and determination of outcome ratings. By implementing a pilot project, the state has the opportunity to start with a small, manageable number of Service Coordinators and closely examine how child outcomes are measured.

For data analysis specific to the SSIP, state staff was able to identify children who entered and exited the program in cohort one or two of the pilot. Data for these children were disaggregated by multiple variables, including: eligibility reason; length in program; gender; race/ethnicity; poverty and geographic region. There were 771 children in the pilot project; however, after factoring out any child who did not participate in Part C at least six months and who did not have both entry and exit in the pilot project, there were only 146 children to consider for data analysis.

A review of demographics for the children in the pilot project revealed 82 percent were eligible based on confirmation of developmental delay, 14 percent based on diagnosed condition and 4 percent based on newborn conditions. On average, children in the pilot project participated in Part C less than one year. Children with diagnosed or newborn conditions in the pilot project were in the program just a few months longer than children with developmental delays (12 months and 9 months, respectively). There were more males than females participating in the pilot project (68 percent and 32 percent, respectively), and 61 percent of the

families in the pilot project were at-or-below the poverty level. The race/ethnicity of the children participating in the pilot project was 90 percent white (not Hispanic) and 6 percent black (not Hispanic). Hispanic and other race/ethnicities accounted for the remaining 4 percent of the children participating in the pilot project.

Given the small N size, a comparison between pilot data and statewide Part C data was necessary to determine whether the pilot sample is representational of the program. Demographic data for gender, race/ethnicity and poverty levels for children in the pilot project were similar to statewide Part C data. However, a review of eligibility reasons indicated 82 percent of the children in the pilot were eligible based on developmental delay, which did not align with statewide Part C data (82 percent and 54 percent, respectively). Of the 13 percent of children with diagnosed conditions in the pilot, seizures and autism were the conditions that appeared most often, which again, did not align with statewide Part C data. Subsequently, the average length of time in the program was only 10 months, compared to the statewide average of 18 months. Although demographic information was consistent between pilot data and statewide Part C data, it is important to note the eligibility reasons and time spent in the Part C program were inconsistent.

The state conducted a preliminary calculation of the progress statements for children in the pilot project. For the 146 children who entered and exited the pilot, summary statements for all three outcome areas indicated approximately 95 percent of the children entered below age expectations and made substantial improvement (compared to approximately 75 percent statewide) and approximately 10 percent of the children exited at age expectation (compared to approximately 30 percent statewide).

The results of the pilot indicate an even more increasing < data pattern in the progress statements when compared to statewide ECO trends (see *Figure 5: Progress Statements for ECO Pilot vs. Statewide Data*). A closer look at the three outcome areas in each summary statement revealed summary statement one in the pilot project had similar performance in all three outcome areas, but summary statement two continued to have slightly lower performance for appropriate behaviors, as was found in the statewide ECO data.

Given the small N size for children in the pilot project and the discrepancies in eligibility reasons and length of time in the program for children in the pilot versus statewide Part C data, caution must be given when interpreting any progress data from the pilot project at this time. Furthermore, eligibility reasons and time spent in the Part C program are directly related to child outcomes. Thus, generalizing the findings from the pilot group to the statewide Part C data should not be attempted. As more children enter and exit the pilot in future years, the state will gain a larger N size that is more representational of the statewide Part C data for children participating in Part C. Until that time, the state cannot accurately ascertain the expected performance for child outcomes.

1.4. Stakeholders.
The State Interagency Coordinating Council (SICC) has been involved as stakeholders in Part C data analyses since the beginning of the State Performance Plan/Annual Performance Report (SPP/APR). The SICC was instrumental in creating the original SPP/APR and, on an

annual basis, assist with analyzing data and revising the plan. The SICC also reviews other Part C data at each meeting to assist the state with programmatic changes as needed. More recently, members from the Early Childhood Outcomes (ECO) work group have been included as key stakeholders to assist the state with analysis of child outcome data. This work group meets at least three times a year to review child outcome data and discuss implications for changes to policies and procedures as needed.

The state's process of sharing and analyzing data with these two stakeholder groups has followed these general steps: First, a particular topic or situation is identified. Next, state staff collect data on the topic or situation. If existing data reports are not available, state staff request the data be pulled from the WebSPOE system or other data source. Next, state staff analyze data and compile summary charts or reports. Then, state staff send the summary information to stakeholders to review prior to an upcoming meeting with time designated to review and discuss the data. Finally, at the meeting, state staff present the topic and related data or other information to the group with an initial explanation of the results.

This process allows stakeholders time to review and think about information prior to listening to an explanation of the information. The timing of these discussions with stakeholders is very important; data must be compiled, presented and explained to stakeholders in a timely manner so the state can incorporate any recommendations into the next steps for action on the topic or situation. The state believes this process provides a more meaningful opportunity to review the topic or situation, understand the data presented and provide suggestions or recommendations to the state. When information is meaningful and understood, stakeholders are more likely to be engaged not only in the immediate discussion but also in future meeting activities, which increases the likelihood that members of the SICC and ECO work group will continue to be key stakeholders involved in evaluating and revising the SSIP during Phases II and III.

The following materials provide more detail on Part C data analysis and serve as examples of information presented to stakeholders in preparation for the development of the Missouri Part C SSIP:

Missouri Part C SPP/APR
http://dese.mo.gov/special-education/state-performance-plan

SSIP Phase I Data Analysis
http://dese.mo.gov/sites/default/files/se-fs-sicc-missouri-part-c-first-steps-state-systemic-improvement-plan-ssip.pdf

Missouri Part C SSIP (Draft)
http://dese.mo.gov/sites/default/files/se-fs-sicc-ssip-presentation-for-sicc-november-2014.pdf

1.5. Summary of Data Analysis.
The state utilized multiple data types and sources, including quantitative and qualitative data from the WebSPOE system, surveys of parents, providers and Service Coordinators in order to conduct data analysis of the Part C program. One piece of necessary data missing from the data

available to the state to measure program improvement was observations of Service Coordinator and provider practices. The state is currently working on a plan to collect the observational data in 2015-16 to be included in the Missouri Part C SSIP in future years.

A broad data analysis of all SPP/APR indicators revealed the state has had consistent and high/improving performance on all results indicators except Indicator 3: Child Outcomes. An additional data analysis that focused on child outcomes indicated the collection and determination of child outcomes was: not consistent within or between SPOEs; not frequent enough to accurately report progress between entry and exit; and not meaningful to the IFSP team and service delivery. These three issues were determined to be the root cause for data quality issues with child outcomes. Although the state considered SPP/APR compliance data and the potential effect on program improvement, it was determined compliance data were not contributing to inconsistency in the results data for child outcomes.

Further analysis of the three outcome areas and two summary statements for Indicator 3: Child Outcomes revealed trends in the summary statements, with summary statement one having slightly lower performance in social-emotional skills and summary statement two having slightly lower performance in appropriate behaviors.

After initial implementation of the Part C ECO pilot project, an analysis of preliminary data for 146 children who entered and exited the pilot thus far indicated more consistent results between and within regions with summary statement one showing similar data for all three outcome areas. Due to the small N size for children in the pilot project and the discrepancies in eligibility reasons and length of time in the program for children in the pilot versus statewide Part C data, caution must be given when interpreting any progress data from the pilot project at this time.

An in-depth look into 618 and other state data presented a picture of Part C in Missouri where more than half the children are: at-or-below poverty; participating in Part C due to a developmental delay; and receiving services in natural environment settings for approximately 18 months. Given the state's narrow criteria for half-age delay in development and children with disabilities are briefly served by Part C, the challenge in measuring Missouri child outcomes is how to make the biggest impact on a child with disabilities and their family in a short period of time.

2. Component 2: Analysis of State Infrastructure to Support Improvement/Build Capacity

2.1. Program Infrastructure.

The Missouri Department of Elementary and Secondary Education (the Department) is the state lead agency responsible for implementing Missouri's Part C program. Within the Department, staff in the Early Intervention section in the Office of Special Education are responsible for implementing and monitoring the Part C program, which is comprised of regional System Point of Entry offices, a single Central Finance Office, and independent providers (see *Figure 6: Missouri Part C Infrastructure*).

A. Lead Agency Staff – State staff in the Early Intervention section consists of a Part C Coordinator, regional Area Directors and compliance staff. The Part C Coordinator oversees the implementation of the regulations and contractual obligations of the System Point of Entry (SPOE) and Central Finance Office, and coordinates with multiple state agencies including other sections within the Department. The Part C Coordinator is also responsible for the supervision of the regional Area Directors and compliance staff.

There are five Area Directors located in state offices throughout the SPOE regions. Each Area Director provides guidance, training and technical assistance in the areas of child find, public awareness, operations, compliance requirements and best practice to two SPOE offices. The Area Directors also conduct annual provider trainings and monthly monitoring of provider billing practices.

There are two Compliance staff who are responsible for maintaining and revising the Missouri State Plan for Part C as needed. This state plan contains the rules governing the Part C program, incorporating any federal regulations or state laws related to Part C. Compliance staff also conduct annual compliance monitoring and verify timely correction of all identified noncompliance. Any child complaints related to the Part C program are investigated by Compliance staff.

The current Part C infrastructure was several years in the making. Prior to 2005, there was no designated Early Intervention section at the lead agency; the program was managed by staff in four different sections: finance; compliance; data and effective practices. In 2006, the lead agency identified the need for one primary person as the main contact for Part C and a Part C Coordinator was designated. In 2007, the lead agency identified the need to end a contract for consultants to deliver training and technical assistance, and instead, employ staff as Area Directors to conduct these activities. In 2013, compliance staff dedicated to Part C became part of the Early Intervention section, which completes the infrastructure as it is today. Enhancements to the infrastructure in recent years have resulted in a current state-level system that has the strength and capacity to support statewide improvement.

B. System Point of Entry (SPOE) – When Part C was implemented throughout Missouri in 1994, the lead agency was the Department of Elementary and Secondary Education but service coordination was provided by staff in the Departments of Health and Mental Health. Based on discussions and recommendations from the SICC, a redesign task force was organized in 1998 to review the strengths and challenges in the infrastructure for Part C. This review resulted in the

need to establish contracts for a System Point of Entry (SPOE) dedicated to providing Part C service coordination. The transition to SPOE service coordination was a gradual process that occurred between 2003 and 2008.

Currently the state is divided into ten early intervention regions, and the State of Missouri contracts with a single entity (i.e., SPOE) in each of the ten regions. The SPOE contract is rebid every five years, creating a five-year cycle that generally aligns with the SPP/APR timeline. The current contract began July 1, 2014 and ends June 30, 2019. The SPOEs are responsible for the local administration of the program, including referral, intake, eligibility determination and Individualized Family Service Plan (IFSP) development. Each agency awarded the SPOE contract employs certain staff, including a SPOE Director and a sufficient number of Service Coordinators and staff to administer the program within the designated region. Therefore, all service coordination activities for Part C are provided by the SPOE.

Past SPOE contracts have focused primarily on being compliant with federal regulations and state laws. As the state was planning to move toward an emphasis on improving child outcomes, there was a need to include language about provider and Service Coordinator practices in the SPOE contract.

The current SPOE contract contains requirements for working with families participating in Part C, including meeting compliance standards, implementing best practices and conducting an annual Needs Assessment. On an annual basis, state staff review specific SPOE contract standards for child find, compliance, early intervention teams, IFSP meeting activities and a needs assessment plan. If a SPOE does not meet at least the minimum performance for each standard, liquidated damages are applied and a technical assistance plan is created to assist the SPOE with operations in the region. If a SPOE is found in breach of contract, the state may elect to cancel and rebid the contract prior to the end of the five-year cycle.

C. Central Finance Office (CFO) – The State of Missouri also contracts with a Central Finance Office (CFO) whose responsibilities include provider enrollment and payments, fiscal management, and maintaining the child record and IFSP data system, WebSPOE. The WebSPOE system contains all elements of referral, evaluation, eligibility determination, and IFSP development and implementation. Data are entered in real-time and are accessible based on a user-level access in order to maintain privacy. The CFO provides a support help desk to trouble-shoot problems with users, which helps the state ensure accurate data are entered in the system.

Past contracts for the CFO did not describe contract monitoring and accountability reporting between the state and contractor. In 2010, when rebidding the CFO contract, the state added contract monitoring activities. Later the state identified the need for regular accountability reporting, and in 2013-14 the state amended the contract to include required reporting from the CFO. This requirement has strengthened the data and finance systems at the CFO.

On an annual basis, state staff review specific CFO contract standards for attending operational meetings, disseminating provider payments and submitting accountability reporting. If the CFO does not meet at least the minimum performance for each standard, liquidated damages are applied and a technical assistance plan is created to assist the CFO with their

operations. If the CFO is found in breach of contract, the state may elect to cancel and rebid the contract prior to the end of the renewal period.

2.2. Challenges with Part C Service Delivery.

All early intervention services in Missouri are delivered by providers who meet the state's qualifications. Currently there are 30 different Part C specialties for provider services. To enroll in Part C, providers sign an agreement to provide early intervention services in accordance with federal and state regulations and any state laws pertaining to Part C. Providers are independent vendors for Part C, which means providers may be employed by an agency or be an independent sole-proprietor.

A. Independent Providers – Once enrolled, providers are listed on a statewide website known as the Service Matrix that is accessible to the general public. The Service Matrix contains basic information about the provider's availability, coverage area, education and training/experience. Service Coordinators assist the family in selecting providers from the Service Matrix to deliver early intervention services. A transportation incentive is available to reimburse providers for some travel costs, which helps ensure provider availability across the state. Since Missouri has an independent provider system, a provider's coverage area, scheduling and caseload size are considered on a case-by-case basis when arranging for a new family to be served by a particular provider.

The independent provider system created a multidisciplinary service model where providers from multiple disciplines would work independently with little collaboration between one another. Providers conducted assessments independent of one another and made recommendations for services specific to their specialty. Multiple providers were conducting home visits and exchanging information with the family about their child but had little time dedicated to communications amongst themselves. Families often had to tell their story multiple times to multiple providers coming in and out of their homes. This system created an inefficient way of organizing providers, difficulty with oversight of provider practices and fragmented communication between families and providers. The state identified the need to explore other options for delivering services and considered alternatives to the traditional approach for service delivery in Part C.

B. Service Delivery Options – Discussions about exploring various Part C service delivery models began at State Interagency Coordinating Council (SICC) meetings in 2006. The state was seeking not only a model that would help organize providers and improve communications, but also a model that emphasized evidence-based practices for early intervention, including how young children learn best, how to address the child and family's functional needs and how best to engage the family in interventions. State staff identified the implementation stages compiled by the National Implementation Research Network (NIRN) as the framework for systems change it the Part C program.

To begin the Exploration and Adoption Stage, a stakeholder group, convened at the request of the SICC, began statewide discussions regarding the strengths and challenges for service delivery in Missouri Part C. State staff contacted the National Early Childhood Technical Assistance Center (NECTAC) to assist the state with information on various early intervention

service models used by other states and to facilitate several meetings with stakeholders to discuss possible improvements to Missouri's current system. Stakeholders identified some aspects that were working well, such as flexibility in provider enrollment as independents or agencies, the authorization and claim system for provider payments, and most services were delivered in natural environments. However, stakeholders also identified some aspects that were not working, such as inconsistent provider coverage, limited provider interaction, gap in communication between Service Coordinators and providers, access to providers for training and technical assistance, and families repeating their stories to multiple providers.

In addition to the stakeholder meetings to discuss service delivery options, state staff reviewed literature and attended national conferences seeking this information and assessing the fit between various models and the program needs. One model in particular stood out during stakeholder discussions: *A Five-Component Approach to Early Intervention in Natural Environments*, as presented by Dr. Robin McWilliam. Not only did this model provide a transdisciplinary approach to evidence-based practices for early intervention services, but also allowed for adaptation by states in order to achieve a good fit for an individual state's Part C infrastructure. In 2007, Dr. McWilliam delivered three workshops throughout the state to introduce providers and Service Coordinators to the model. Over 800 providers attended the workshops, which focused on five key practices:

• Understanding the family ecology
• Functional intervention planning
• Transdisciplinary service delivery
• Effective home visits
• Collaborative consultation to child care

The response from those attending the workshops was overwhelmingly positive and many providers volunteered to try these practices, which advanced the state's Exploration and Adoption stage. Dr. McWilliam revisited Missouri in 2008 to conduct a fourth workshop on *Early Intervention in Natural Environments* where the focus was collaborating and consulting in transdisciplinary teams. Representatives from all ten SPOE regions participated in this workshop. By 2009, there were 18 teams across the state trying these activities. Feedback from those participating was overwhelmingly positive and providers were requesting the state add more teams; however, state staff needed to define the parameters of this approach and share the defined model with the early intervention community before statewide implementation. Using implementation science according to NIRN, these were the essential activities in the next stage: Program Installation.

With the assistance of NECTAC and other stakeholders, including the SICC, the state first identified the aspects of the Part C program that had to be altered or created prior to statewide initial implementation, such as increased funding, state staff, policy development and reporting requirements. Stakeholder feedback recommended the state avoid completely turning the Part C system upside down because there were several things that were working in the program, and instead, consider key changes to improve services. The state identified the need to modify certain aspects of the Part C system to improve services, such as connecting the SPOE contract for service coordination to the CFO contract for provider enrollment. However, to sustain revenue,

certain aspects of services had to stay intact, such as the authorization and claim system used for Medicaid reimbursement. With assistance from NECTAC, the state created a strategic plan for improving the Part C service delivery system. Given the strength of the SPOE and CFO contracts, the state sought to create a model that leveraged these contracts to build the capacity to sustain a statewide change to service delivery yet sustain adequate funding.

C. Creating Early Intervention Teams (EITs) – In 2008, the Missouri Part C program began implementing a transdisciplinary team approach to service delivery. Missouri's transdisciplinary team approach was established using the *Seven Key Principles: Looks Like/Doesn't Look Like* document developed by the workgroup on principles and practices in natural environments, an OSEP TA community of practice for Part C settings. This document outlines the key principles and concepts for delivering services in natural settings and gives providers examples of what the practice should look like.

In 2009, the rebid for SPOE contracts included a requirement for SPOEs to organize providers into teams, referred to as Early Intervention Teams (EITs). The development of statewide teams was included in the contract as an incremental implementation over the five-year contract period, beginning with the development of a regional plan, then 25 percent of all new families assigned to teams and building to 100 percent of all new families assigned to teams by the end of the five-year period.

EITs are designated and organized by the SPOE to serve a specified area within the SPOE region. Each EIT must include at least one Service Coordinator, Physical Therapist, Occupational Therapist, Speech/Language Pathologist and Special Instructor, which are the primary specialties delivered to families. The number of teams per region is determined by the SPOE. The EIT serves as the main source of providers for families in the Part C program. IFSP services are provided using a primary service provider approach where one professional from the team, or primary provider, is chosen by the IFSP team to serve as the main support to the family. Families requiring services from disciplines other than those represented on the EIT (i.e., ancillary providers) receive those services from other disciplines enrolled with the CFO.

Data recently collected from the WebSPOE system indicate there are 111 teams with approximately 900 providers statewide. Early intervention teams meet on average once a month, but some teams in rural areas with smaller caseloads and larger geographic areas meet every six to eight weeks.

With the assistance of NECTAC and Dr. Robin McWilliam, state staff developed five levels of training for Service Coordinators and providers on teams. All five levels of training were disseminated using a face-to-face training format in 2009-10 through 2013-14. In addition to regular training, providers and Service Coordinators receive written information and technical assistance, as needed. The content of the five training levels include an orientation to EIT practices, the distinction between EI and IFSP teams, how to conduct a routines-based interview, quality home visiting practices and adult learning styles, and how to deliver support-based home visits. The state used various pieces of literature to develop the trainings, including the *Seven Key Principles: Looks Like/Doesn't Look Like* document and peer-reviewed journal articles

about evidence-based practices for assessing young children with disabilities and delivering effective home visits.

In July 2014, 99 percent of all new families in Part C were assigned to teams. A gradual movement allowed each SPOE agency one year to reflect on any lessons learned from the practice teams, as well as time for the state to educate the early intervention community, develop materials and disseminate training to providers.

A system of services delivered by independent providers creates both strengths and challenges for Part C. Providers who are independent vendors allows for increased flexibility and independence on the provider's part, which increases the coverage area for delivering services throughout the state. However, it is challenging to coordinate provider activities and communications between vendors. Transitioning to a transdisciplinary team model, specifically the addition of EIT meetings, has improved the communications between and among providers and Service Coordinators. Yet there is still room for improvement in the coordination of team activities and the recognition of best practices for home visits and team meetings. While the state can identify the number of providers participating on EITs and how often they meet, more information about the performance of teams (e.g., home visiting activities, EIT meeting discussions, etc.) is critical for improving child outcomes.

2.3. Current State-level Initiatives.

There are two key initiatives currently underway in Missouri that can be leveraged to increase the state's capacity to improve outcomes for children with disabilities. These two initiatives are the *Top 10 by 20* plan and Part C Benchmarks.

A. Top 10 by 20 Plan – A state-level initiative recently launched by the Missouri Department of Education is the *Top 10 by 20,* a major improvement effort that aims for student achievement in Missouri to rank among the top 10 states by 2020. In order to transform education in Missouri, this initiative requires the Department to focus on a few goals with a few strategies that are done with precision and fidelity. Thus, the work involved in the *Top 10 by 20* is transformational not incremental. Consistent with the best research currently available, the strategies and actions focus on leadership, collaborative culture and climate, teach/learning practices, assessment to inform teaching and learning, effective use of data, and parental and/or community engagement. The initiative for *Top 10 by 20* includes the following four goals for improving student achievement:

- *Goal 1: All Missouri students will graduate college and career ready.* This goal focuses on increasing the number of students who are college and career ready. Missouri public schools are taking achievement seriously and working hard to ensure all students are prepared to succeed. Objectives include increasing the percent of students scoring at or above the proficient level on state assessments and the National Assessment of Educational Progress (NAEP), and increasing the percent of students who achieve a qualifying score or above on a college and career readiness assessment and graduate.

- *Goal 2: All Missouri children will enter kindergarten prepared to be successful in school.* This goal focuses on early childhood education which makes children more successful in the classroom and has a tremendous impact throughout the entire school system. Every

3- and 4-year-old in Missouri should be exposed to quality learning opportunities at home or in a formal setting. Objectives include increasing capacity and qualified teachers in state- and federally-funded preschool programs, serving more families in the Parents as Teachers program, improving the quality and consistency of early childhood data and making information about early childhood services and opportunities available in a variety of formats to all stakeholders.

- *Goal 3: Missouri will prepare, develop, and support effective educators.* This goal focuses on effective teacher preparation programs, leadership development and improved educator evaluation. Missouri must prepare and retain effective teachers and educational leaders in communities across the state. Objectives include highly effective preparation programs for teachers, implementing a continuum of leadership development, and defining local evaluation progresses for teacher evaluation and measures of student growth.

- *Goal 4: The Missouri Department of Education will improve departmental efficiency and operational effectiveness.* This goal focuses on improving the Department's operations to support the implementation of the *Top 10 by 20* initiatives. Objectives include increasing awareness of the *Top 10 by 20* plan, implementing a communication plan for major initiatives and increasing efficient business operations within the Department's offices.

For each goal, a cross-agency team of Department staff meet regularly to identify key strategies, activities, targets and timelines for progress toward the designated goal. State staff representing the Part C program participate on the Goal 2 early learning team, which includes staff from the Office of Special Education (i.e., Part B, 619), Office of Early and Extended Learning (i.e., early childhood and preschool programs), Office of Data Systems Management (i.e., special education and public school district data), Office of College and Career Readiness (i.e., curriculum), Office of Quality Schools (i.e., Title I preschools) and Division of Financial and Administrative Services (i.e., special education funds).

Given the focus on school readiness, the work of this cross-agency team has provided Part C with the opportunity to align program improvement for improving the outcomes of children participating in Part C with activities in other offices within the Department to ensure all offices are working together to increase the number of children prepared to enter kindergarten. One example of coordinating the work between offices was a program alignment activity in which staff reviewed the eligibility criteria, data collection, services and training for home visiting programs in the Office of Special Education (Part C) and the Office of Early and Extended Learning (Parents as Teachers). Staff made multiple suggestions for modifying program criteria, aligning the competencies and trainings for home visitors and data collection for both programs. These suggestions are currently under consideration.

B. Part C Benchmarks – Another existing statewide improvement initiative, related to the *Top 10 by 20* Goal 4 for improving departmental efficiencies and operational effectiveness, is the Part C benchmarks. As described under the data analysis component of the SSIP, state staff conducted an extensive analysis of all fiscal year activities to create a more focused and efficient work plan for Part C. After careful consideration of each activity, any critical missing data were

considered for future data collection and any activity that did not provide for efficiency and effectiveness was eliminated. As a result of this activity, the state identified the need to organize the reporting of these data from various sources.

State staff created a Part C strategic plan for collecting data in a manner that could easily identify discrepancies between different sources of data related to the same activity. This strategic plan is called the Benchmarks for Part C program improvement. The benchmarks are a summative assessment used to formally measure regional performance at the end of a fiscal year. The plan for benchmarks came from two earlier strategic plans created with assistance from NECTAC: the IFSP quality review that identified key indicators for rating the quality of IFSP documents and the early intervention team plan for statewide implementation of a transdisciplinary approach to service delivery in Part C. Given the prior work on determining quality services, the state needed a way to pull together the various data pieces and create one, comprehensive collection and evaluation tool for the Part C program.

The Part C Benchmarks consist of six key processes in early intervention: referral; assessment; determining services; delivering services; exiting the program; and support to professionals. Within each benchmark there are essential functions for implementation, measurement and evaluation of that aspect of the program. Each benchmark contains multiple data sources to provide a comprehensive picture of Part C fiscal year activities, including data from: SPP/APR indicators; needs assessment to evaluate SPOE operations, child find activities and implementation of early intervention teams; SPOE contract performance standards; parent and provider surveys; service monitoring; best practice review; and the Part C ECO pilot project.

The benchmarks will be finalized in 2014-15 and data will begin to be collected by the state in 2015-16. Once data are compiled for a single benchmark, each SPOE region is rated as emerging practice, satisfactory practice or best practice. Once data are compiled for all six benchmarks, each SPOE region is given an overall rating. Once data are compiled for all 10 SPOE regions, the Part C program is given an overall rating.

Determining the quality of Part C practices is an evolving process in Missouri. The strategic plan involves multiple aspects of evaluating and measuring provider and Service Coordinator practices. The use of benchmark data will assist the state in identifying the strengths and challenges, as well as training and technical assistance necessary for improving child outcomes in Missouri.

2.4. Systems Infrastructure.
Missouri's Part C system contains the key infrastructure components for governance, finance, professional development/technical assistance, quality standards, data and accountability/monitoring. A description of each component follows:

A. Governance – The Missouri State Plan for Part C outlines the state rules which incorporate federal requirements and state laws related to Part C. The Missouri State Plan for Part C provides the authority for the administration and infrastructure of Missouri's Part C program, including reference to state laws related to infrastructure requiring the Department to contract for a System Point of Entry and a Central Finance Office (i.e., RSMo 160.900 through

160.915) and state laws related to funding to help pay for Part C services (i.e., RSMo 160.920 through 160.933 and RSMo 376.1218).

Additionally, the state plan includes policies for the state's service delivery model and provider reimbursement rates. As changes are made to federal regulations, state laws or other state policies, the Missouri State Plan for Part C is revised accordingly to ensure public participation in changes to the plan and that the rules are current and accurate.

The Part C program utilizes two strategic plans for program improvement. First is the *Top 10 by 20*, the Department's strategic plan for student achievement in Missouri to rank among the top 10 states by 2020. This plan includes two goals that directly relate to the Part C program: *Goal 2: All Missouri children will enter kindergarten prepared to be successful in school*, and *Goal 4: The Department will improve departmental efficiency and operational effectiveness*. Each year the Part C program identifies specific activities and measurements to assist the Department in advancing these goals, including the use of videos highlighting best practices in early intervention settings to be used in professional development activities (Goal 2) and the use of research projects that study the workload and caseloads of Service Coordinators to identify areas of inefficiencies and productivities (Goal 4).

Second is a Part C specific strategic plan developed with assistance from NECTAC to track the implementation of early intervention teams. The strategic plan includes multiple aspects of evaluating and measuring provider practices. Through the process of developing, reviewing and evaluating activities in these strategic plans, the Part C program can measure program improvement.

B. Finance – The Missouri Part C program is funded through six revenue sources: state funds; federal IDEA Part C and B funds; family cost participation fees; and private and public insurance. The program is primarily funded by state and federal dollars (65 percent and 20 percent, respectively). State dollars are general revenue funds specifically allocated for the Missouri Part C program each year by the legislature. In recent years, the amount of general revenue for the Part C program has increased. Federal dollars are special education funds from IDEA for Part C (birth to age three) and Part B (ages 3 to 21). The amount of federal funds has been steady in recent years.

Missouri law requires families of eligible children to pay a monthly fee (i.e., family cost participation) in order to receive IFSP services, unless the family does not have the ability to pay. The monthly fee is based on the family's household size and income level. Additionally, Missouri law requires private insurance carriers to help pay for the cost of Part C services by either making a one-time payment each year or by reimbursing certain direct services delivered to children in Part C. While revenue from family cost participation has been relatively steady, revenue from private insurance has decreased in recent years due to changes in how carriers elect to help pay for Part C services.

For public insurance, the Department has an interagency agreement with the Department of Social Services, MO HealthNet Division (MHD), which allows MHD to help pay for direct services delivered to children in First Steps who are also eligible and participating in MO

HealthNet/ Medicaid. In 2014-15, the agreement was revised to expand the types of services MHD will reimburse, which will increase revenue for the Part C program.

Together these various funding sources create a system of payments for the Part C program. The creation and implementation of additional funding sources besides state and federal funds provides a mechanism that helps to increase the sustainability of the Part C program. Each year funds are allocated for program improvement, including funds for state staff to provide technical assistance, early intervention team meeting time for providers and annual training for Service Coordinators and providers.

C. Professional Development/Technical Assistance – Missouri's professional development and technical assistance system is a coordination of activities conducted by SPOE agencies, the CFO and state staff. SPOE agencies and the CFO assist the state with provider recruitment, retention and credentialing; however, the regional Area Directors are the state staff primarily responsible for overseeing training and technical assistance to Service Coordinators and providers. On an annual basis, Area Directors provide statewide face-to-face trainings to both Service Coordinators and providers to reiterate Part C requirements and reinforce best practices for serving children with disabilities. Annual surveys and training post-assessments/questionnaires ensure that feedback is received from Service Coordinators and providers. This feedback helps the state understand workforce strengths or needs and any regional challenges to develop future training and target technical assistance.

Targeted technical assistance may be provided to a region based on a collection and review of different types of data in Missouri's Part C program. The need for regional technical assistance may be determined from a review of quantitative data (e.g., data posted monthly on the Department's website, canned reports available in the WebSPOE, etc.) or qualitative data (e.g., surveys of provider or Service Coordinator needs for additional information, training or meeting post-assessments, concerns about the quality of provider practices, etc.). Targeted technical assistance is not intended to be a statewide activity, but rather, assistance to a specific region based on an identified need. However, if multiple regions are having the same issue, targeted technical assistance may become a statewide activity.

D. Quality Standards – Each SPOE implements a transdisciplinary approach to services using early intervention teams. Providers on the teams conduct evaluation and assessment activities and deliver early intervention services in natural environments according to nationally recognized recommended practices. Missouri's transdisciplinary team approach was established using the *Seven Key Principles: Looks Like/Doesn't Look Like* document developed by the workgroup on principles and practices in natural environments, an OSEP TA community of practice for Part C settings. Given recent revisions in the 2014 Division of Early Childhood (DEC) recommended practices, the state is working on aligning and incorporating these practices into the state's team model for service delivery.

The review of quality practices includes two key activities, a Needs Assessment and Best Practice Review. First, at the regional level, SPOE agencies have a contractual requirement to conduct an annual needs assessment using data to identify the strengths and challenges in the regional system. The Needs Assessment is a formative assessment used to check the progress of

SPOE operations throughout the year. The Needs Assessment includes a review of SPOE operations, child find activities and the use of teams, including observations of IFSP meeting activities and the quality of provider practices in home visits. These components were specifically selected as the main influencers of positive child outcomes. For each key component of the Needs Assessment, the SPOE uses multiple sources of data to rate the region as emerging, satisfactory or best practice.

Second, at the state level, Area Directors conduct an annual best practice review, which includes a review of sample initial IFSP and Transition IFSP meeting activities from each region. The Best Practice Review is a summative assessment used to measure the SPOE operations in a given fiscal year. During the Best Practice Review, an Area Director reviews IFSP content, progress notes, case notes, etc. in a child's record and measures how the information is connected to the child's daily routines and the parent's concerns, priorities and resources. Again, these components were specifically selected as the main influencers of positive child outcomes. For each component of the Best Practice Review, the Area Directors rate the child's record as emerging, satisfactory or best practice.

Beginning in 2015-16, data from these key activities, as well as SPP/APR and related data, will be collected in the Part C Benchmarks in order to measure the quality of the regional early intervention system. The Benchmarks were created through a compilation of various resources but the primary influence was the *Seven Key Principles: Looks Like/Doesn't Look Like* document, a critical document used to create early intervention teams. Six benchmarks were selected as key processes in early intervention: referral; assessment; determining services; delivering services; exiting the program and support to professionals. Within each benchmark there are essential functions for implementation, measurement and evaluation of the program. The use of benchmark data will assist the state in identifying the strengths and challenges as well as training and technical assistance necessary for improving child outcomes in Missouri.

E. Data – The primary source for quantitative data for Missouri Part C is the WebSPOE system. Data pulled from this system are used to create monthly reports for the public which are posted on the Department's website. These reports include information about regional child count, referral numbers, referral sources and exit reasons. In 2014-15 child outcome ratings per SPOE region were added to the monthly report. Additional revisions are expected in 2015-16 to ensure data on the services, progress and outcomes for children in Part C are available to the public on a monthly basis. Annual fiscal reports are posted with information about the average cost per child per region and the statewide cost for administration of the program and services to children. These data are reviewed and discussed in quarterly SICC and SPOE meetings to help the state identify trends in costs during the implementation of teams. In the past five years, there has been a general decreasing cost in the administration and direct services to children in Part C. Additional analysis and drill-down into the financial data will be conducted in 2014-15 to determine the impact early intervention teams have had on the cost of the Part C program.

A secondary source of data is qualitative information collected from surveys of Part C providers, Service Coordinators, parents or other members of the early intervention community in order to gain perceptions, reflections and expectations about the Part C program. Family survey content was revised in 2014-15 to collect perspectives about child progress and outcomes

from families who were actively participating in Part C separately from families who recently exited Part C. In 2015-16, surveys sent to providers and Service Coordinators will be reviewed and revised to collect perspectives about child progress and outcomes. These survey procedures will provide multiple perspectives to give a statewide and regional view on child outcomes.

F. Accountability/Monitoring – The state utilizes three key accountability/monitoring activities throughout each fiscal year: compliance monitoring; provider service monitoring and accountability reporting. First, state staff (i.e., Compliance staff) conduct compliance monitoring to ensure the Part C program is correctly implementing regulations and correcting noncompliance consistent with OSEP Memorandum 09-02. Second, state staff (i.e., Area Directors) monitor claims for early intervention services to ensure providers are documenting and claiming services in accordance with state guidelines and instructions. Third, the SPOE and CFO contractors submit regular accountability reports/invoices that are reviewed by state staff (i.e., Part C Coordinator) to ensure required contract activities are being met and contract payments are made in an accurate and timely manner.

Through the use of a SPOE Needs Assessment and Part C Benchmarks, the state will collect data from a new source, i.e., observations of provider and Service Coordinator practices at home visits and IFSP meetings. Once observation data are combined with existing monitoring and accountability activities for compliance, services and contracts, the state will have a comprehensive method to document the performance of each region and measure the impact of improvement activities.

2.5. Stakeholders.

The State Interagency Coordinating Council (SICC) has had a long history of being involved as stakeholders in the Part C infrastructure, going back as far as 1998 with a redesign of Part C that created the use of System Points of Entry and dedicated service coordination. The SICC has been involved in every step of system change including the initial recommendation for inquiry into options for Part C service delivery, participating in stakeholder meetings for service delivery and evaluating the progress of implementing the team model for service delivery.

More recently, members of the *Top 10 by 20* Goal 2 early learning team and the ECO work group have been included as key stakeholders in the analysis of the Part C infrastructure for Phase I of Missouri's Part C SSIP. Most members of these stakeholder groups have a history of involvement in early childhood but not necessarily Part C. State staff and stakeholder group members often have meetings and discussions outside of designated stakeholder time on how to align Missouri's early childhood programs, including Part C.

The identification of these three stakeholder groups was important to ensuring relevant stakeholders were involved in conducting an extensive review of the current infrastructure and providing recommendations for building the capacity of providers and Service Coordinators to implement the state's improvement plan. An advantage of having stakeholders with long-standing involvement in Part C is the likelihood that these members will continue to be key stakeholders involved in evaluating and revising the plan during Phases II and III of the SSIP.

By including stakeholders who are internal and external to the Part C program, the state was able to collect a wide range of perspectives. The timing of stakeholder discussions about infrastructure is very important because system changes in infrastructure require long-term commitment. Based on the state's experience in creating SPOE service coordination and implementing early intervention teams, system change to infrastructure requires at least three years of implementation before the impact can be evaluated. Since the SPOE contract is a five-year cycle that aligns with the SSIP timeline, the state is in a good position to implement changes to infrastructure as part of the systemic improvement plan.

The following materials provide more detail on Part C infrastructure and serve as examples of information presented to stakeholders in preparation for the development of the Missouri Part C SSIP:

Stakeholder Meetings for Service Delivery Options
http://dese.mo.gov/special-education/first-steps/nectac-stakeholder-meetings

Path to Early Intervention Teams in Missouri (Original Edition – 2009)
http://dese.mo.gov/sites/default/files/PathforTeamdevwithbackgroundinfoUpdatedMarch2010.pdf

Path to Early Intervention Teams in Missouri (2nd Edition – 2014)
http://dese.mo.gov/sites/default/files/se-fs-path-to-eit-second-edition.pdf

Part C Service Coordinator Caseload Study
http://dese.mo.gov/sites/default/files/se-fs-sicc-combocaseloaddatapresentationsiccFINAL.pdf

Part C Eligibility Review and Forecasting Study (Original Study – 2007)
http://dese.mo.gov/sites/default/files/PhillipsandAssociatesReport09_07.pdf

Part C Eligibility Review and Forecasting Study (Updated Study – 2012)
http://dese.mo.gov/sites/default/files/se-fs-sicc-phillipsandassociatesreportsicc11912.pdf

Missouri Part C SSIP (Draft)
http://dese.mo.gov/sites/default/files/se-fs-sicc-ssip-presentation-for-sicc-november-2014.pdf

2.6. Summary of Infrastructure Analysis.

Missouri has a long history of commitment to improving the Part C program at both the state and regional level. A great deal of time and effort has been spent on the Part C infrastructure, including the creation of a System Point of Entry (SPOE) and the implementation of early intervention teams (EITs). The ability for the state to contract for SPOE agencies to operate a regional Part C system is arguably the strongest aspect of infrastructure for Missouri's Part C program. Complimentary to the SPOE contract, the state's ability to employ five regional staff who monitor the contract and provide training or technical assistance to the region enhances the strength of the regional system. The implementation of a SPOE Needs Assessment as a formative assessment to check progress of SPOE operations throughout the year, combined with the state's benchmarks as a summative assessment to formally measure the regional performance each year, provides the Part C program with a mechanism to track performance and

improvement while supporting the state's *Top 10 by 20* plan for improving education in Missouri.

Maintaining a system of services delivered by independent providers creates both strengths and challenges for Part C. This provider system allows for increased flexibility and independence on the provider's part which has increased the coverage area for services throughout the state, but it is challenging to coordinate provider activities and communications. While transition to the EIT model has improved the communications between and among providers and Service Coordinators, there is still room for improvement in the coordination of team activities and the recognition of best practices for home visits and team meetings. The state can identify the number of providers participating on EITs and how often they meet, which was necessary in the initial implementation and organization of providers into teams; however, it is the performance of EITs, the activities conducted in home visits and the discussions in EIT meetings that are critical for improving child outcomes. Thus, the state identified the EITs as the component of infrastructure that can be leveraged to build the capacity to implement the Missouri Part C SSIP. By improving EIT infrastructure, the state will be able to increase support in the practices of professionals to improve the regional Part C system which will ultimately improve outcomes for all children participating in Missouri Part C.

3. Component 3: State-Identified Measureable Result (SIMR)

3.1. Rationale Based on Data Analysis.

Results from an extensive, broad data analysis indicated the area with the largest inconsistencies in data trends and fewest explanations for the inconsistencies was SPP/APR Indicator 3: Child Outcomes. The state conducted a more in-depth analysis of child outcomes to determine the factors contributing to inconsistent data in this indicator. Results from the in-depth analysis revealed the collection and determination of early childhood outcome (ECO) ratings was: not consistent within or between SPOEs; not frequent enough to accurately report progress between entry and exit; and not meaningful to the IFSP team and service delivery. These three issues were determined to be the root cause for data quality issues with child outcomes.

To address the root cause, the state initiated a Part C ECO pilot project to increase the use of consistent, frequent and meaningful data for child outcomes. Data were collected and analyzed from 146 children who had both entry and exit ratings while participating in the pilot project. Preliminary results for both summary statements indicate an increase in the percentages for summary statement one and a decrease in the percentages for summary statement two, consistent with the statewide trend in Indicator 3: Child Outcomes. While demographic data for gender, race/ethnicity and the poverty level of children in the pilot project were comparable to statewide Part C data; the eligibility reasons and length of the time in Part C for children participating in the pilot did not align with statewide Part C data.

Given the small N size for children in the pilot and the lack of alignment with statewide Part C data, the state was cautious to use this preliminary data to establish a baseline and targets for the state-identified measurable result (SIMR). Instead, the state went back to the baseline data for Indicator 3: Child Outcomes (i.e., 69.1 percent) to establish the baseline for the Missouri Part C SSIP. Therefore the SIMR is directly aligned to the SPP/APR. Gradually, as more children enter and exit the current pilot project, and then as more regions are added to the pilot, the demographic data collected from the pilot will be comparable to statewide Part C data. At that point, data can be analyzed to determine the impact of the pilot procedures and ultimately, the outcomes for children participating in the pilot project.

For Indicator 3: Child Outcomes, the state estimates the trend in decreasing summary statement two is due to the initial years of collecting and rating outcomes in Missouri Part C being conducted using procedures that were not consistent and not meaningful, resulting in data that was not reliable and inconsistent with the state's eligibility criteria. Summary statement two continues to show decreased percentages. The state is awaiting data that show a plateau for summary statement two before establishing an expected percent of children who function within age expectations when exiting Part C. Once the state has pilot data representational of statewide demographics and participation rates in Part C, the state will have a better indication of appropriate targets for summary statement two. Because of this additional challenge with summary statement two, the state decided to focus efforts on summary statement one for the SIMR.

A closer look at the three outcome areas and two summary statements for Indicator 3: Child Outcomes revealed summary statement one continually had slightly lower performance in social-emotional skills when compared to the other summary statements (see *Figure 3: Trends in ECO*

Summary Statements – Missouri Part C). Therefore, the data reported for the Missouri Part C SIMR will address improving social-emotional skills for children who enter and exit the pilot.

3.2. Rationale Based on Infrastructure and Current Initiatives.

Results from an analysis of the state's Part C infrastructure revealed Missouri has a long history of commitment to improving services for children and families. The use of contracts for SPOEs to provide service coordination and oversight by Area Directors has created a strong regional system. The current SPOE contract requirement to conduct an annual needs assessment provides the mechanism to use observations of providers and Service Coordinators during IFSP meetings and home visits to improve practices.

The use of an independent provider structure has presented both strengths and challenges. The recent implementation of early intervention teams (EITs) has reduced some challenges in communicating and coordinating activities between SPOEs and independent providers, but there is still room for improvement in this aspect of the Missouri Part C infrastructure. EIT meetings can be leveraged to strengthen communication and collaboration between providers and Service Coordinators. Additionally, EIT meetings provide an opportunity for professionals to not only strategize about activities for specific children and families, but also time to discuss evidence-based practices or recommended practices that positively impact time spent with families during home visits.

The state has two state-level initiatives that will be leveraged to build the state's capacity to implement positive social-emotional skills for children with disabilities. The *Top 10 by 20* plan aims to improve student achievement in Missouri, including an emphasis on preparing young children to be successful in kindergarten. The Part C benchmarks initiative aims to collect multiple sources of data to measure regional performance, including a benchmark on the progress of children exiting Part C.

Enhancing the EIT meeting infrastructure and using observation data in the SPOE Needs Assessment gives the state the opportunity to access meaningful data about provider practices. Connecting provider practices to initiatives already in place for improving the education of young children provides the state with the ability to improve child outcomes in social-emotional skills and evaluate the state's progress in implementing the SSIP.

3.3. SIMR Statement, Baseline and Targets.

Based on an analysis of information related to Part C data, infrastructure and current initiatives, Missouri identified the following statement of measureable results for children with disabilities:

> *By FFY 2018, Missouri Part C intends to increase by 10 percent the number of children with disabilities who improve their social-emotional skills by the time they exit Part C, for children entering Part C below age expectation in social-emotional skills.*

Based on this statement of measureable results for children with disabilities, Missouri identified the following baseline and target data:

Baseline Data

FFY	2013
Data	**69.1%**

FFY2014 – FFY2018 Target Data

FFY	2014	2015	2016	2017	2018
Target	**71.1%**	**73.1%**	**75.1%**	**77.1%**	**79.1%**

Based on a synthesis of the current strengths and challenges with Part C data, infrastructure and current initiatives, the state intends to increase the percent of children who substantially increase their growth in social-emotional skills by 2 percent each year in order to meet the rigorous target of 10 percent by 2018. The use of an increase of 2 percent each year aligns with the state's *Top 10 by 20* plan for improving education and aligns with the ECO work group mission to both improve the outcomes for children participating in Part C and prepare for a successful transition to Part B. By building upon existing initiatives, the state was able to develop appropriate and adequate targets for statewide improvement in the outcomes of children participating in Missouri Part C that are achievable through the implementation of the SSIP and attainable within the time frame for the current SPP/APR.

Given the state's current status of implementing EITs, the Part C ECO pilot project, and other state-level initiatives already in place, the state is in a good position to begin collecting data for the SIMR.

3.4. Stakeholders.
The State Interagency Coordinating Council (SICC) was introduced to the components of the SSIP in April 2013. During a visit with the U. S. Department of Education, Office of Special Education Programs (OSEP) in August 2014, components and options for the state's SIMR were reviewed and discussed with individuals representing the SICC, the ECO work group and the Department's early learning team. A draft statement for the SIMR was discussed at the SICC meeting on September 12, 2014. State staff also discussed the same statement with stakeholders at the ECO work group meeting on September 30, 2014. By including stakeholders who are internal and external to the Part C program, the state was able to collect a wide range of perspectives.

Suggestions from all stakeholder groups were similar in recommending the state's SIMR should focus on summary statement one to increase the percent of children making progress in their social-emotional skills. Since most members of the stakeholder groups have a long history of involvement in Part C, stakeholders already had knowledge of the trends in data for SPP/APR Indicator 3: Child Outcomes, as well as the implementation of early intervention teams (EITs). This combination of knowledge about data and infrastructure was critical to the stakeholder's selection of an appropriate SIMR for Missouri's Part C SSIP. An advantage of having stakeholders involved in selecting the SIMR is the likelihood that these members will continue to be key stakeholders involved in evaluating and revising the SSIP during Phases II and III.

The following materials serve as examples of information presented to stakeholders in preparation for the development of the SIMR in the Missouri Part C SSIP:

SSIP Phase I Data Analysis
http://dese.mo.gov/sites/default/files/se-fs-sicc-missouri-part-c-first-steps-state-systemic-improvement-plan-ssip.pdf

Missouri Part C SSIP (Draft)
http://dese.mo.gov/sites/default/files/se-fs-sicc-ssip-presentation-for-sicc-november-2014.pdf

4. Component 4: Selection of Coherent Improvement Strategies

4.1. Existing Improvement Activities.
 In preparation for selecting a coherent set of strategies to improve child outcomes, the state reviewed two activities that were in the early stages of implementation and could be scaled up to improve child outcomes at a statewide level: the Part C early childhood outcomes (ECO) pilot project and the use of early intervention teams (EITs). After initial implementation of these two activities, the state collected preliminary information about what is working and what is not working. Key take-aways from the preliminary review are included in the following discussion of existing improvement activities.

 A. Part C ECO Pilot Project – From a data analysis that focused on child outcomes, the state recognized revisions to procedures were necessary in order to collect more consistent and frequent information to determine outcome ratings. After an initial implementation of the Part C ECO pilot project in two regions of the state, the state learned consistent and frequent procedures for child outcomes can result in consistency in ratings between and within regions. However, after collecting feedback from providers and Service Coordinators participating in the pilot project, the state learned some aspects of the pilot were working and some were not working. The most common topics discussed during feedback sessions included training for the pilot project, parent engagement and child skills/progress.

Training for the pilot project was initially conducted by state staff who met with Service Coordinators to review the procedures, including timelines and documents used in the pilot project. Feedback indicated the information shared at the initial training for Service Coordinators was adequate and regular monthly follow-ups from state staff were helpful for the first six months; however, no training for providers was a problem. The state realized all individuals who are expected to participate in the activity need direct training from the state. Relying on Service Coordinators to train providers was not working, as providers were not receiving the necessary information to fully participate in the pilot project.

Parent engagement was intended to be enhanced in the pilot project. Initial discussions about the importance of parent engagement included definitions and various examples. Feedback indicated the information shared at initial training and follow-up discussions was adequate; however, the lack of strategies to help recognize and improve the level of parent engagement when families were not participating was not working well in the pilot project. Feedback revealed providers and Service Coordinators were often able to recognize when a parent was not engaged or had low engagement in discussions or activities, but once recognized, providers and Service Coordinators struggled with how to improve the situation.

Discussing a child's skills and progress compared to him or herself has been a cornerstone of Missouri Part C; however, an aspect that was intended to be enhanced in the pilot project was an additional comparison of the child's skills and progress to age-appropriate skills. Feedback indicated initial training on using the key question on the decision tree (i.e., *does the child function in ways that would be considered age-appropriate?)* in each outcome area was adequate. After initial implementation of the pilot, feedback indicated sometimes Service Coordinators were unsure how to talk with parents about age-appropriate skills in situations where the child was medically fragile or terminally ill. Service Coordinators requested strategies

and resources to become more knowledgeable about age-appropriate skills and more comfortable discussing progress.

B. Early Intervention Teams (EITs) – From an analysis of Part C infrastructure that focused on the implementation of a new service delivery model, the state recognized revisions to the structure of EITs were necessary in order to build the capacity to recognize, utilize, measure and evaluate the use of evidence-based practices and its impact on child outcomes. After a SPOE contract period that focused on organizing providers into regional teams and ensuring assignment of new families to teams, the state collected feedback from providers that indicated, in general, the use of teams was working but providers wanted more information about a variety of aspects related to home visiting activities. This feedback was used to create additional training about support-based home visits that was delivered in statewide provider meetings.

The state began the next SPOE contract period with a requirement to review and assess the regional operations, including provider practices and EIT meetings. After collecting feedback from EIT members at the beginning of the new contract period, the state learned few EITs stated they needed more information on team building, which was an indication that the logistics around organizing and forming teams was complete. However, the top topic that EITs requested more information about was, once again, aspects of home visiting. The request for more information on these particular topics is an indication that EITs needed continued support in recognizing and utilizing evidence-based practices for home visiting. It is also an indication that the manner in which information has been disseminated to providers (i.e., statewide provider trainings) is not working. Feedback from providers and Service Coordinators in the pilot project suggested the need for more time to collaborate and coordinate services during EIT meetings instead of in statewide provider training events.

Feedback revealed discussions are more meaningful and relevant to individual needs when held in smaller, cohesive groups such as EITs. Additional feedback indicated short video clips are the most helpful in describing what a quality home visit or joint visit activities should look like.

Once EIT members have the mechanism to review and discuss evidence-based practices, the state recognizes the need to be able to measure and evaluate the use of these practices and its impact on child outcomes. With the state's recent development of an annual needs assessment as a formative assessment to check the progress of SPOE operations throughout the year and annual benchmarks as a summative assessment to formally measure the regional performance each year, the state will have the necessary mechanisms to measure the use of evidence-based practices, the impact of these practices on child outcomes and the state's progress in implementing the SSIP.

After a review of what was working and what was not working in the existing activities to improve child outcomes, the state identified the following key strategies that will lead to measurable improvement in the SIMR.

4.2. New Strategies to Support Improving Child Outcomes.

Based on data and infrastructure analyses that align with the current initiatives for implementing a Part C ECO pilot project and using an EIT model for service delivery, Missouri

selected the following four levels of coherent strategies to support EIT members in improving child outcomes:

A. Level One: Existing ECO Pilot Project – State staff need to implement the following five strategies to support existing pilot project sites with implementing practices to improve child outcomes:

1. Provider Training. Deliver the initial and follow-up training materials related to the Part C ECO pilot project to all EIT members serving children and families in the pilot regions.

2. EIT Meeting Time. Modify the rules for EIT meeting activities to allow up to 45 minutes of paid time for each EIT meeting to be used specifically for activities that will improve the social-emotional skills of children participating in Part C. The state will develop a list of acceptable activities that can be completed during this paid time.

3. Evidence-Based Practices. Align the 2014 DEC Recommended Practices to the *Seven Key Principles: Looks Like/Doesn't Look Like* to further inform EITs of best practices in home visiting and examples of quality early intervention services, including the triadic model for early intervention (see *Figure 7: The Triadic Model for Early Intervention*). The state will seek the assistance of the ECTA center to complete this alignment activity.

4. Use of Video. The state will provide EITs with short video clips highlighting best practices in early childhood settings, which will address the feedback from stakeholders who identified the need for more illustrations of best practices and will align with Goal 2 in the Department's *Top 10 by 20* plan. When possible, the state will utilize existing national video libraries or state recordings.

5. Child Development Materials. The state will provide EITs with information about social-emotional development and age-appropriate developmental milestones for infants and toddlers. When possible, the state will utilize existing materials from national TA centers such as Technical Assistance Center on Social Emotional Intervention (TACSEI) and the Center on the Social and Emotional Foundations for Early Learning (CSEFEL).

B. Level Two: Needs Assessment – Once state staff have completed the level one strategies, SPOEs participating in the Part C ECO pilot project need to implement the following three strategies as part of the annual Needs Assessment:

1. EIT Meetings. SPOEs will observe and evaluate EIT meeting activities to determine the team's effectiveness and need for additional training or technical assistance.

2. IFSP Meetings. SPOEs will observe IFSP meeting discussions to evaluate the methods used by EIT members when addressing child outcomes.

3. Home Visits. SPOEs will observe providers during home visits to evaluate the use of evidence-based practices.

C. Level Three: Benchmarks – After providing additional support to EITs, a mechanism is needed to measure and evaluate the use of evidence-based practices. Early intervention is multi-faceted; aspects of child development, parent engagement and intervention are intertwined and overlap one another. Thus, the state developed a set of benchmarks to represent multiple aspects of the early intervention process that influence child outcomes.

Beginning in 2015-16, on an annual basis, state staff will compile multiple data sources (i.e., reports, surveys and observations) for each benchmark to provide a comprehensive picture of the performance of each SPOE region. Once data are compiled for all six benchmarks, the state will give each SPOE region an overall rating of emerging, satisfactory or best practice. The state will use the overall ratings to determine if the current level of training and technical assistance is working or if a more intensive plan is necessary to improve child outcomes.

D. Level Four: Statewide Results – Once the existing pilot project has reached successful implementation, as measured by results from the SPOE Needs Assessment and state Benchmarks, the remaining regions will be gradually added into the pilot project as new cohorts. A region's readiness to be included in the pilot will be determined by their SPOE operations and EIT performance. Additional cohorts will be added until the entire state is implementing the procedures used in the pilot project. A gradual roll-out allows time for the state to compile a complete set of activities for initial training, regular follow-up meetings and data collection that represent an improved process built on the lessons learned thus far. Gradual roll-out also provides time for the state to conduct data analysis and regional evaluation after each cohort is added.

These four levels of improvement strategies will lead to improvement in accurately identifying, measuring and evaluating the percent of children with positive social-emotional skills because the state has aligned current initiatives with the SSIP. By making slight revisions to these existing initiatives, the state is in good position to support systemic change in Part C.

4.3. Stakeholders.
During a visit with the U. S. Department of Education, Office of Special Education Programs (OSEP) in August 2014, existing improvement activities were reviewed and suggestions for selecting strategies for implementing the SSIP were collected from individuals representing the SICC, the ECO work group and the Department's early learning team. State staff also collected suggestions for improvement activities from members attending the ECO work group meeting on September 30, 2014, as well as from members attending the SICC meeting on November 21, 2014. By including stakeholders who are internal and external to the Part C program, the state was able to collect a wide range of perspectives.

Suggestions from all stakeholder groups were similar in recommending the state's improvement activities should focus on the use of time during EIT meetings and more information about evidence-based practices in home visiting, specifically related to parent-child attachment or engagement and age-appropriate skills for infants and toddlers. Since stakeholders already had knowledge of the improvement activities used in the Part C program, the discussions focused on which activities were working and which activities could be leveraged for the SSIP. This history and knowledge about program activities was critical in the selection of key improvement strategies for Missouri's Part C SSIP. An advantage of having stakeholders

involved in identifying key improvement strategies is the likelihood that these members will continue to be key stakeholders involved in evaluating and revising the SSIP during Phases II and III.

   The following materials provide more detail on Part C improvement activities and serve as examples of information presented to stakeholders in preparation for the development of the Missouri Part C SSIP:

Provider Experience with Early Intervention Teams – 2012 Survey
http://dese.mo.gov/sites/default/files/se-fs-sicc-providersurvey2012resultssummaryfinal.pdf

Missouri Part C SPP/APR
http://dese.mo.gov/special-education/state-performance-plan

Missouri Part C SSIP (Draft)
http://dese.mo.gov/sites/default/files/se-fs-sicc-ssip-presentation-for-sicc-november-2014.pdf

5. Component 5: Theory of Action

5.1. Rationale.

A good theory of action requires levels of strategies and activities that build on one another. For Missouri Part C, this involves using Early Intervention Teams (EITs) as the mechanism for reviewing, discussing and evaluating evidence-based practices that have a positive impact on child outcomes. Building the capacity of the EIT provides the opportunity to support professionals to create meaningful change in the delivery of early intervention services. It also involves improving the implementation of the Part C ECO pilot project as the mechanism to enhance discussions at IFSP meetings, which can consequently provide more accurate and more frequent measures of child progress. Building the knowledge and practices in the pilot project provides the opportunity to accurately measure children's progress in early intervention.

While the use of EITs and the implementation of the Part C ECO pilot project are still evolving, feedback suggests that more aspects of these initiatives are working than not working. By making slight modifications to the current structures and procedures through the implementation of key improvement strategies, the state will create a system that is likely to provide accurate and timely measurements for improved outcomes for children with disabilities.

5.2. Missouri Theory of Action Statement

If the state implements Level One improvement strategies by providing the mechanisms (i.e., provider training and paid time for professional development during EIT meetings) and materials (i.e., evidence-based practices, use of videos and child development information) for EIT members to have meaningful discussions about evidence-based practices that improve social-emotional skills in children with disabilities . . . then EIT members will recognize typical and atypical social-emotional skills and strategize how to improve the outcomes of children participating in Part C.

And if the SPOEs implement Level Two improvement strategies by conducting an annual needs assessment, which includes observations of EIT meetings, IFSP meetings and home visits, to assess current practice . . . then the SPOEs will know if EIT members are using evidence-based practices and, if needed, provide targeted training and technical assistance.

And if the state implements Level Three improvement activities by compiling multiple benchmark data (i.e., reports, surveys and observations) to evaluate regional performance . . . then the state will determine if the current level of training and technical assistance is working or if a more intensive plan is necessary to improve child outcomes.

And if the state implements Level Four improvement activities and all EIT members discuss child progress in social-emotional skills during IFSP meetings and use the decision tree to accurately rate child outcomes in social-emotional skills . . . then parents will engage in IFSP meeting discussions to recognize progress in their child's social-emotional development. And if all EIT members use evidence-based practices and monitor the child's progress during home visits . . . then parents participate in home visits to learn strategies to improve their child's development. And if parents use these strategies between visits with providers . . . then the intended consequence is an increased percent of children with positive social-emotional outcomes.

For an illustration of Missouri's Part C theory of action, see Figure 8: Missouri Part C Theory of Action – Graphic Illustration.

5.3. Stakeholders.

A draft theory of action was discussed with individuals representing the SICC, the ECO work group and the Department's early learning team during a visit with the U. S. Department of Education, Office of Special Education Programs (OSEP) in August 2014. Feedback from this meeting was incorporated into the version presented to members attending the ECO work group on September 30, 2014 and again to members attending the SICC meeting on November 21, 2014. In these meetings, state staff presented a narrative for the theory of action and two options for a graphic illustration. Given the inclusion of stakeholders who are internal and external to the Part C program, the state was able to collect a wide range of perspectives.

Suggestions from these meetings were similar in the recommendation for a theory of action that uses *if/then* statements that illustrate key state and regional activities most likely to have an impact on interactions with families, which ultimately improves child outcomes. Since stakeholders understood the importance of parent engagement in early intervention services, the discussions focused on how to illustrate parent engagement. It was important for stakeholders to know how services are delivered in Part C and the importance of parent engagement in order to select an appropriate graphic illustration for the theory of action. A benefit of having stakeholders involved in choosing the theory of action is the likelihood that these members will continue to be key stakeholders involved in evaluating and revising the SSIP during Phases II and III.

The following materials serve as examples of information presented to stakeholders in preparation for the development of the theory of action in the Missouri Part C SSIP:

SSIP Phase I Data Analysis
http://dese.mo.gov/sites/default/files/se-fs-sicc-missouri-part-c-first-steps-state-systemic-improvement-plan-ssip.pdf

Stakeholder Meetings for Service Delivery Options
http://dese.mo.gov/special-education/first-steps/nectac-stakeholder-meetings

Path to Early Intervention Teams in Missouri (Original Edition – 2009)
http://dese.mo.gov/sites/default/files/PathforTeamdevwithbackgroundinfoUpdatedMarch2010.pdf

Path to Early Intervention Teams in Missouri (2nd Edition – 2014)
http://dese.mo.gov/sites/default/files/se-fs-path-to-eit-second-edition.pdf

Part C Service Coordinator Caseload Study
http://dese.mo.gov/sites/default/files/se-fs-sicc-combocaseloaddatapresentationsiccFINAL.pdf

Part C Eligibility Review and Forecasting Study (Original Study – 2007)
http://dese.mo.gov/sites/default/files/PhillipsandAssociatesReport09_07.pdf

Part C Eligibility Review and Forecasting Study (Updated Study – 2012)
http://dese.mo.gov/sites/default/files/se-fs-sicc-phillipsandassociatesreportsicc11912.pdf

Missouri Part C SSIP (Draft)
http://dese.mo.gov/sites/default/files/se-fs-sicc-ssip-presentation-for-sicc-november-2014.pdf

Figure 1: Missouri Part C Data Sources

Child Record Web-based System

The system captures real-time data for referral, intake, eligibility, IFSP and services. The system is compliance-driven, meaning it requires critical data elements and conducts edit checks before data are saved.

Provides for:

- Canned reports
- Monthly query
- One-time ad hoc reports

Parent and Provider Surveys

At least once a year, the state or its designee conducts interviews and/or disseminates surveys to Part C providers, service coordinators and parents to collect their input about the program.

Provides for:

- Annual feedback
- Multiple perspectives
- State and regional analysis

Observations of Professionals' Practices

Routine observations of the Part C professionals who work with families are critical for a triangulation of data sources. These data will be required of local programs beginning FY16.

Provides for:

- Direct observation of skills
- Identification of discrepancies
- Training/TA needs

Data Types

Quantitative
- Child count/caseloads
- Amount of services
- Timelines

Qualitative
- Description of outcomes
- Progress notes
- IFSP meeting activities

Data Type

Qualitative
- Provider/service coordinator knowledge and experiences based on self-assessment
- Parents' satisfaction and involvement based on their opinions

Data Types

Quantitative
- Discrepancy between practice and other data types

Qualitative
- Provider competency level
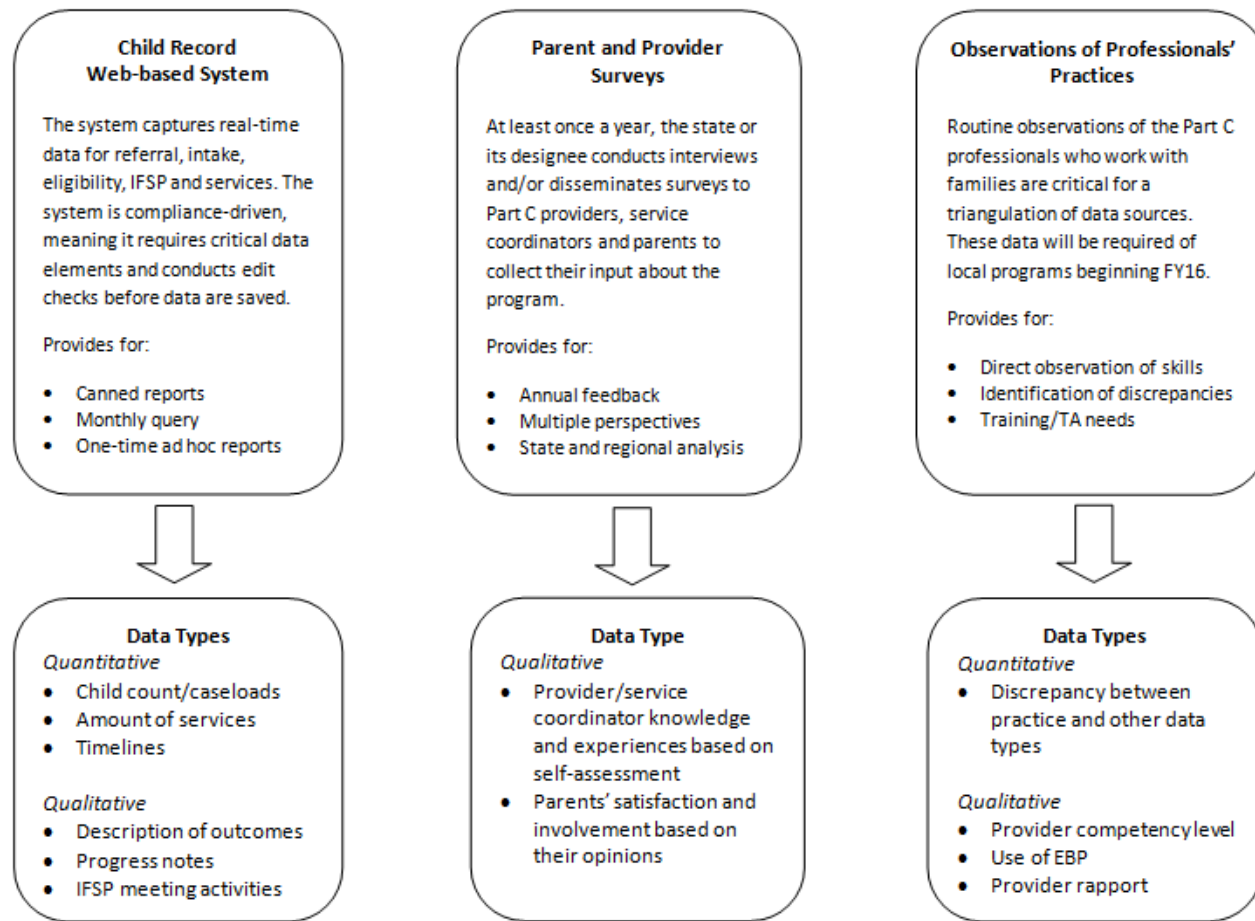- Use of EBP
- Provider rapport

Figure 2: Missouri Annual Performance Report Summary – Part C

Indicator	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13		2012-13 Target	Gap from Target		Progress/ Slippage
1 - Timely Services	69.00%	81.50%	89.90%	90.40%	87.50%	91.50%	81.60%	87.10%	=	100.00%	⊗ -12.90%	⬆	5.50%
2 - Natural Environments	96.90%	97.40%	97.90%	98.00%	98.20%	98.90%	98.90%	99.00%	≥	95.00%	✅ 4.00%	⬆	0.10%
3 - ECO Positive Social Emotional Skills: SS#1	N/A	N/A	N/A	N/A	69.10%	61.70%	74.60%	79.10%	≥	69.20%	✅ 9.90%	⬆	4.50%
3 - ECO Positive Social Emotional Skills: SS#2	N/A	N/A	N/A	N/A	47.40%	41.00%	43.50%	38.40%	≥	47.50%	⊗ -9.10%	⬇	-5.10%
3 - ECO Acquisition & Use of Knowledge & Skills: SS#1	N/A	N/A	N/A	N/A	70.30%	63.80%	76.90%	80.40%	≥	70.40%	✅ 10.00%	⬆	3.50%
3 - ECO Acquisition & Use of Knowledge & Skills: SS#2	N/A	N/A	N/A	N/A	45.50%	41.80%	41.30%	38.50%	≥	45.60%	⊗ -7.10%	⬇	-2.80%
3 - ECO Appropriate Behaviors: SS#1	N/A	N/A	N/A	N/A	73.00%	65.90%	78.20%	81.80%	≥	73.10%	✅ 8.70%	⬆	3.60%
3 - ECO Appropriate Behaviors: SS#2	N/A	N/A	N/A	N/A	36.10%	32.50%	33.20%	31.10%	≥	36.20%	⊗ -5.10%	⬇	-2.10%
4A - Families know their rights	93.50%	92.30%	92.70%	94.60%	96.10%	96.80%	96.20%	96.90%	≥	95.00%	✅ 1.90%	⬆	0.70%
4B - Families effectively communicate needs	95.60%	95.60%	95.90%	95.60%	97.60%	97.20%	97.20%	97.80%	≥	95.00%	✅ 2.80%	⬆	0.60%
4C - Families help children develop and learn	98.20%	96.30%	96.60%	97.40%	98.50%	97.70%	98.00%	98.60%	≥	95.00%	✅ 3.60%	⬆	0.60%
5 - Child Find Birth to 1	0.71%	0.64%	0.76%	0.75%	0.84%	0.92%	0.97%	0.98%	≥	0.85%	✅ 0.13%	⬆	0.01%
6 - Child Find Birth to 3	1.48%	1.37%	1.45%	1.55%	1.72%	1.96%	2.21%	2.23%	≥	1.67%	✅ 0.56%	⬆	0.02%
7 - 45-day Timelines	90.90%	95.10%	95.30%	95.00%	100.00%	96.00%	100.00%	94.00%	=	100.00%	⊗ -6.00%	⬇	-6.00%
8A - Transition Steps & Services	60.10%	92.70%	100.00%	100.00%	100.00%	100.00%	98.40%	48.00%	=	100.00%	⊗ -52.00%	⬇	-50.40%
8B - Timely Notification to LEA	64.00%	90.90%	94.70%	98.60%	100.00%	100.00%	95.10%	84.80%	=	100.00%	⊗ -15.20%	⬇	-10.30%
8C - Timely Transition Conference	57.00%	78.10%	94.20%	92.60%	91.20%	100.00%	100.00%	92.90%	=	100.00%	⊗ -7.10%	⬇	-7.10%
9 - Correction of Noncompliance	95.50%	92.40%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	=	100.00%	✅ 0.00%	⇨	0.00%
10 - Child Complaint Timelines	100.00%	100.00%	100.00%	N/A	N/A	N/A	N/A	N/A	=	100.00%	N/A		N/A
11 - Due Process Timelines	N/A	N/A	100.00%	N/A	N/A	N/A	N/A	N/A	=	100.00%	N/A		N/A
14 - Timely & Accurate Data	93.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	=	100.00%	✅ 0.00%	🟡	0.00%

3/25/2014

Figure 3: Trends in ECO Summary Statements – Missouri Part C
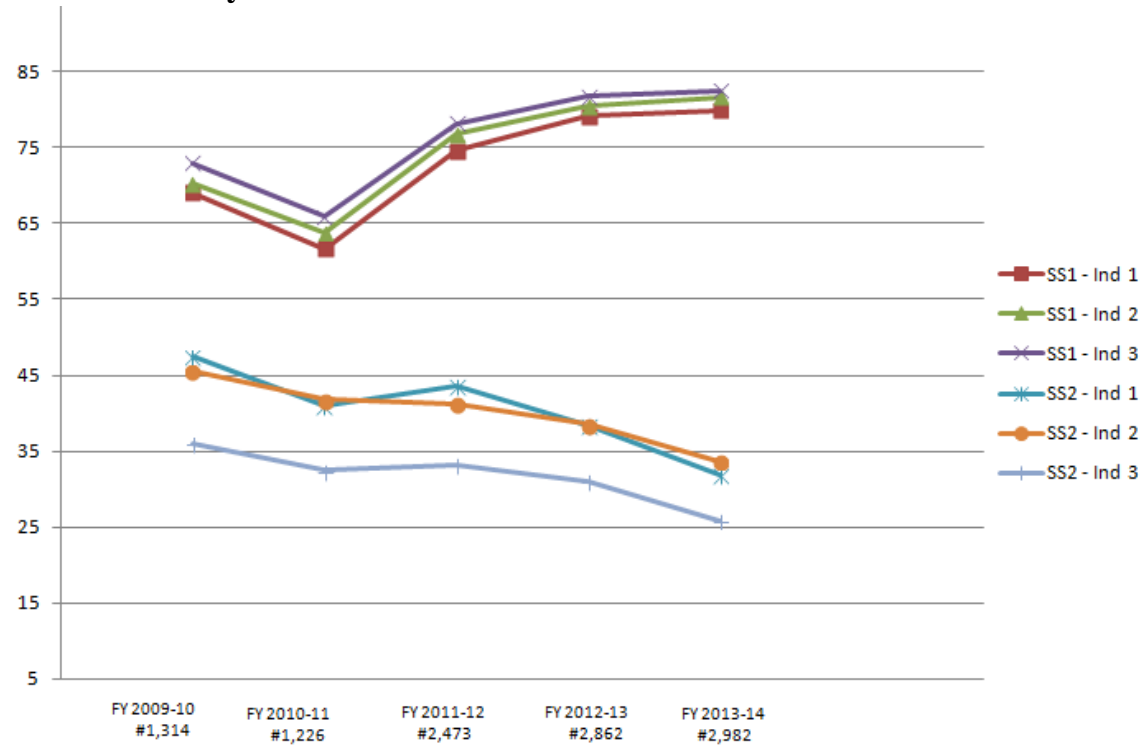
Indicator	2009-10	2010-11	2011-12	2012-13	2013-14
3. A. SS1	69.10%	61.70%	74.60%	79.10%	79.89%
3. A. SS2	*47.40%*	*41.00%*	*43.50%*	*38.40%*	*31.76%*
3. B. SS1	70.30%	63.80%	76.90%	80.40%	81.70%
3. B. SS2	*45.50%*	*41.80%*	*41.30%*	*38.50%*	*33.70%*
3. C. SS1	73.00%	65.90%	78.20%	81.80%	82.48%
3. C. SS2	*36.10%*	*32.50%*	*33.20%*	*31.10%*	*25.82%*

Figure 4: Preliminary Part C Pilot Data

Pilot dates: 10/01/12- 06/30/13	
Number of children rated in Round 1 of the pilot: SPOE 9: 289 SPOE 10: 176 Total: 465	**Number of Service Coordinators in Round 1 of the pilot:** SPOE 9: 6 SPOE 10: 4 Total: 10

NOTE 1: Pilot data submission dates were: 1/1/13, 4/1/13, and 7/1/13.

Accuracy/Consistency

1. For all children who participated in the pilot, did the entry scores assigned in the pilot tend to be higher or lower than the entry scores assigned prior to the pilot? (n =465)

SPOE 9

	ECO 1	ECO 2	ECO 3
Pre-Pilot scores	4	3.7	3.9
Pilot scores	2.4	2.3	2.3

SPOE 10

	ECO 1	ECO 2	ECO 3
Pre-Pilot scores	3	2.7	2.9
Pilot scores	2.3	2.2	2.4
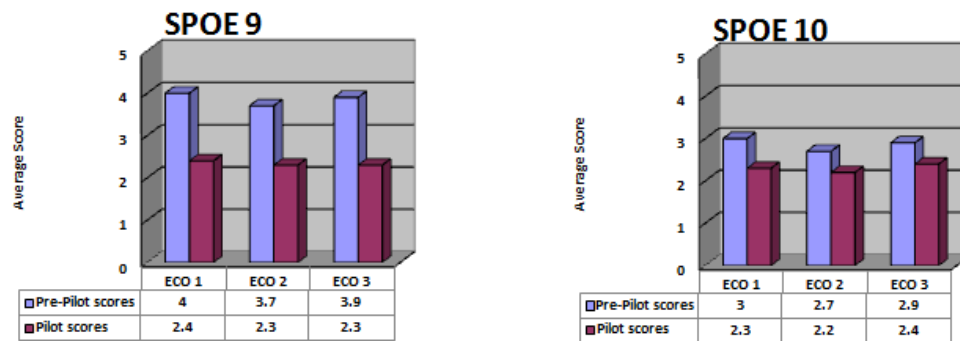
Accuracy/Consistency

2. For children with newborn condition in the pilot, did the entry scores assigned in the pilot tend to be higher or lower than the entry scores assigned prior to the pilot? (n=79)

SPOE 9

	ECO 1	ECO 2	ECO 3
Pre-Pilot scores	4.2	4.2	4.3
Pilot scores	2.2	2.1	1.9

SPOE 10

	ECO 1	ECO 2	ECO 3
Pre-Pilot scores	2.3	2.1	2.1
Pilot scores	1.8	1.8	1.8
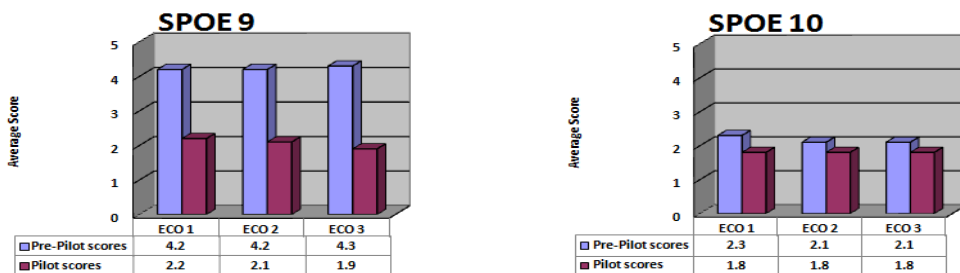
Frequency

3. For children who had an exit rating assigned in the pilot and at least one pilot score before the exit rating, what percentage of children's scores changed between the exit and previous rating? (n=52)

SPOE 9
- No 35%
- Yes 65%
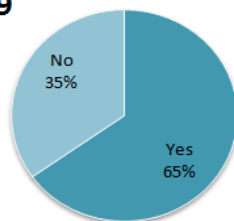
SPOE 10
- No 34%
- Yes 66%
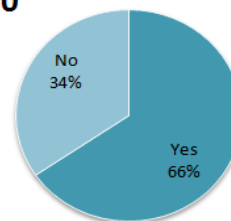
Figure 5: Progress Statements for ECO Pilot vs. Statewide Data
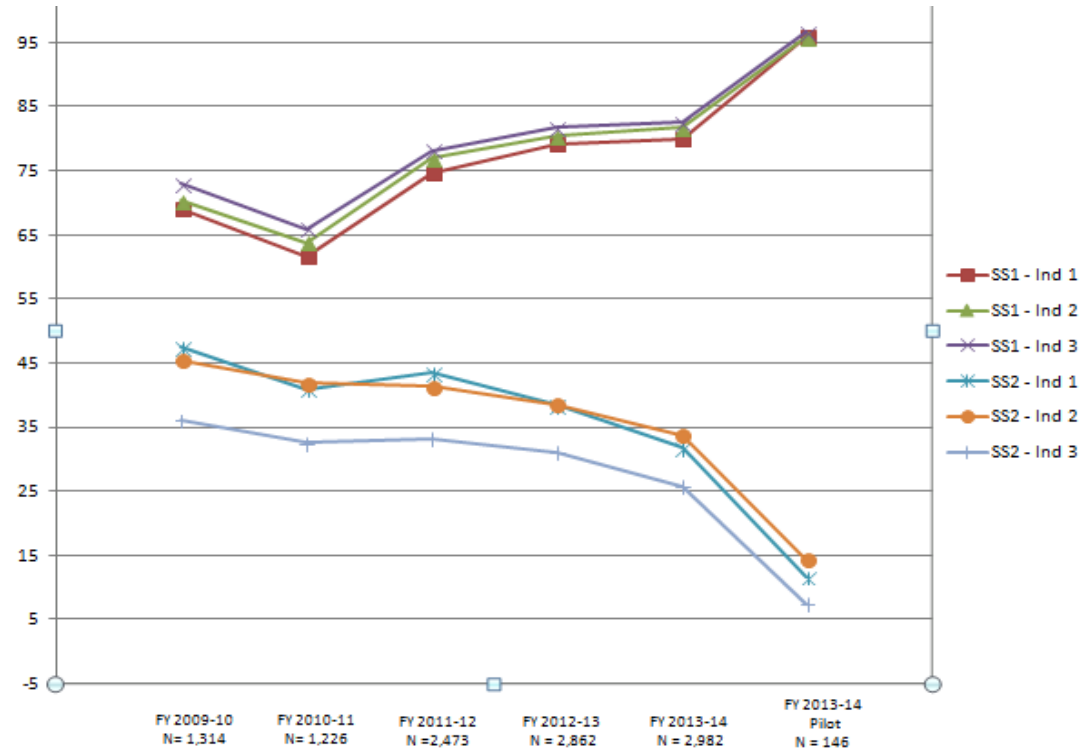
Indicator	2009-10	2010-11	2011-12	2012-13	2013-14	Pilot Data
3. A. SS1	69.10%	61.70%	74.60%	79.10%	79.89%	**95.9%**
3. A. SS2	*47.40%*	*41.00%*	*43.50%*	*38.40%*	*31.76%*	***11.6%***
3. B. SS1	70.30%	63.80%	76.90%	80.40%	81.70%	**95.8%**
3. B. SS2	*45.50%*	*41.80%*	*41.30%*	*38.50%*	*33.70%*	***14.4%***
3. C. SS1	73.00%	65.90%	78.20%	81.80%	82.48%	**96.6%**
3. C. SS2	*36.10%*	*32.50%*	*33.20%*	*31.10%*	*25.82%*	***7.5%***

Figure 6: Missouri Part C Infrastructure

Figure 7: The Triadic Model for Early Intervention

Quality **early intervention** requires **providers using evidence-based practices**, which in turn **improves parent engagement**, which in turn **improves child development**, which in turn results in **positive child outcomes.**

Figure 8: Missouri Part C Theory of Action – Graphic Illustration.

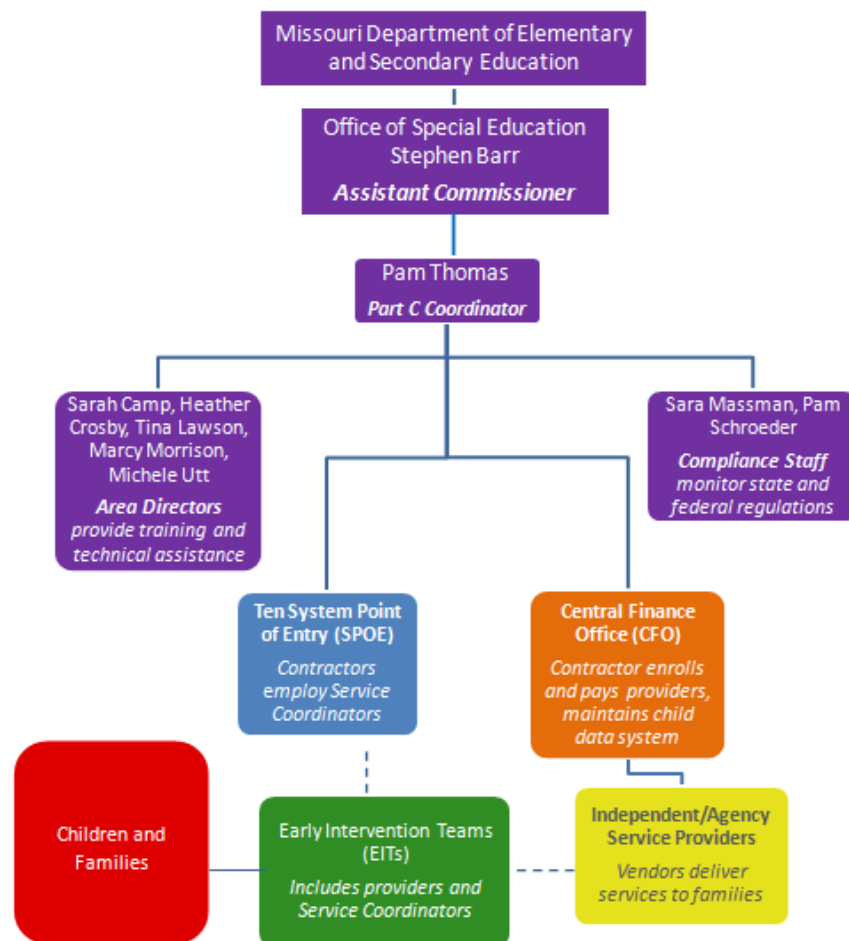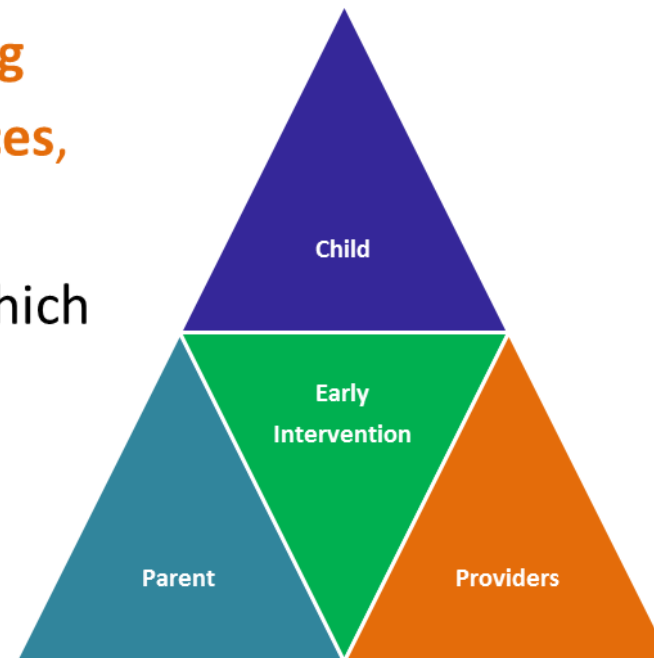| Improvement Activity	If. . .	Then. . .	
Level One	The state provides the mechanisms and materials for EIT members to have meaningful discussions about evidence-based practices that improve social-emotional skills in children with disabilities. . .	EIT members will recognize typical and atypical social-emotional skills and strategize how to improve the outcomes of children participating in Part C.	
Level Two	The SPOEs conduct an annual needs assessment, which includes observations of EIT meetings, IFSP meetings and home visits, to assess current practice. . .	SPOEs will know if EIT members are using evidence-based practices and, if needed, provide targeted training and technical assistance.	
Level Three	The state compiles multiple benchmark data (i.e., reports, surveys and observations) to evaluate regional performance in child outcomes. . .	The state will determine if the current level of training and technical assistance is working or if a more intensive plan is necessary to improve child outcomes.	
Level Four	All EIT members discuss child progress in social-emotional skills during IFSP meetings and use the decision tree to accurately rate child outcomes in social-emotional skills. . .	Parents will engage in IFSP meeting discussions to recognize progress in their child's social-emotional development.	*And ultimately, if parents use these strategies between visits with providers . . . Then the intended consequence is an increased percent of children with positive social-emotional outcomes.*
	All EIT members use evidence-based practices and monitor the child's progress during home visits. . .	Parents participate in home visits to learn strategies to improve their child's development . . .	